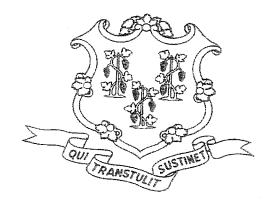
### **State of Connecticut**



### Annual Report of Long-Term Care Facility Cost Year 2021

Name of Facility (as licensed)							
Elim Park Baptist Home, Inc.							
Address (No. & Street, City, State	. /				,, ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		
140 Cook Hill Road, Cheshire, CT	`06410						
Type of Facility							
Chronic and Convalescent		Rest Home wi	th Nursing	, ,			
✓ Nursing Home only		Supervision or	ıly	$\square$	Resident	ial Ca	re Home
(CCNH)		(RHNS)					
Report for Year Beginning 10/1/2020		Report for Yea 9/30/2021	r Ending				
		7/30/2021					
IT · NT 1	CCNH	T DIDIO				r	
License Numbers:	RHNS	Reside				dicare Provider	
	666c		1500H 07-5265			07-5265	
Medicaid Provider Numbers:		CNH	RF	INS		IC	F-IID
	6668				<u> </u>		
For Department Use Only							
Sequence Number   Signed and	Date	Sequence N	Jumber				
Assigned Notarized	Received	Assign		Signed a	ınd Notari	zed	Date Received

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### General Information

		O 11		
Name of Facility (as licensed)	License No.	Report for Year Ended	Page	of
Elim Park Baptist Home, Inc.	666c	9/30/2021	ľ	37
				L

### Administrator's/Owner's Certification

MISREPRESENTATION OR FALSIFICATION OF ANY INFORMATION CONTAINED IN THIS COST REPORT MAY BE PUNISHABLE BY FINE AND/OR IMPRISIONMENT UNDER STATE OR FEDERAL LAW.

I HEREBY CERTIFY that I have read the above statement and that I have examined the accompanying Cost Report and supporting schedules prepared for Elim Park Baptist Home, Inc., for the cost report period beginning October 1, 2020 and ending September 30, 2021, and that to the best of my knowledge and belief, it is a true, correct, and complete statement prepared from the books and records of the provider(s) in accordance with applicable instructions.

I hereby certify that I have directed the preparation of the attached General Information and Questionnaires, Schedule of Resident Statistics, Statements of Reported Expenditures, Statements of Revenues and the related Balance Sheet of this Facility in accordance with the Reporting Requirements of the State of Connecticut for the year ended as specified above.

I have read this Report and hereby certify that the information provided is true and correct to the best of my knowledge under the penalty of perjury. I also certify that all salary and non-salary expenses presented in this Report as a basis for securing reimbursement for Title XIX and/or other State assisted residents were incurred to provide resident care in this Facility. All supporting records for the expenses recorded have been retained as required by Connecticut law and will be made available to auditors upon request.

### \*\*\* Subject To Desk Audit Review \*\*\*

Signed (Administratori)		Date	Signed (Owner)	Date
Al Agen		2/11/2022		
Printed Name (Administrator)		1 1	Printed Name (Owner)	
John Sweene	4		4	
	State of	Date	Signed (Notary Public)	Comm. Expires
to before me:				
	Connecticut	2/11/2022	Elene V. Clouk	2,28,2014
Address of Notary Public				

(Notary Seal)

ELENA V. HOULE
NOTARY PUBLIC OF CONNECTICUT
My Commission Expires 2/28/2024

### State of Connecticut Department of Social Services

55 Farmington Avenue, Hartford, Connecticut 06105

Data Required for Real Wage Adjus	Page	of			
,				1A	37
Name of Facility		Period Cov	ered:	From	То
Elim Park Baptist Home, Inc.				10/1/2020	9/30/2021
Address of Facility 140 Cook Hill Road, Cheshire, CT 06410					
Report Prepared By		Phone Nun	nber	Date	
Elim Park Baptist Home, Inc.		203-272-3547		2/4/2022	
•					Residentia I Care
Item		Total	CCNH	RHNS	Home
1. Dietary wages paid	\$				
2. Laundry wages paid	\$				
3. Housekeeping wages paid	\$				
4. Nursing wages paid	\$				
5. All other wages paid	\$				
6. Total Wages Paid	\$				
7. Total salaries paid	\$				
8. Total Wages and Salaries Paid (As per page 10 of Report)	\$	,			

Wages - Compensation computed on an hourly wage rate.

Salaries - Compensation computed on a weekly or other basis which does not generally vary, based on the number of hours worked.

DO NOT include Fringe Benefit Costs.

### General Information and Questionnaire Type of Facility - Organization Structure

				cility	Report for Y	ear Ended			of
Name of Facility (as shown on license)		203	-272-3547	0 (	9/30/2021	7: \	2		37
Elim Park Baptist Home, Inc.			1		Street, City, Stoad, Cheshire		١		
Zimi v dia Baptist Florito, mo.	CCNH		RHNS		dential Care F		Medicare F	Provid	er No
License Numbers:	666c		141110	1500			07-5265	10110	CI IVO.
Type of Facility (Check appropriate box(es		L		1			0.0200		
Chronic and Convalescent Nursing Home only (CCNH)			t Home with ervision only			Residenti	al Care Hon	ne	
Type of Ownership (Check appropriate box	;)								***************************************
O Proprietorship O LLC O	Partnership	0	Profit Corp.	0	Non-Profit Co	orp. O	Government	0	Trust
If this facility opened or closed during repo	rt year provide	e:		Date	: Opened	Date Clos	sed		
Has there been any change in ownership				J					
or operation during this report year?		0	Yes	<u> </u>	No	If "Yes,"	explain fully	/.	
Administrator									
Name of Administrator					Nursing H				
John Sweeney					Administra		1459		
Other Operators/Owners who are assistant a	dministrators	(f.,11	an nont times	o f th	License	No.:			
Name	diffillistrators	(Tull	or part time)	01 111	License	No :			
					Dicense	110			
					······································				
						ı			

### General Information and Questionnaire Partners/Members

Name of Facility		License No.	Report for Y	ear Ended	Page of
Elim Park Baptist Home, Inc.		666c	9/30/2021		3   37
Legal Name of Partn	ership/LLC	Business A	Address		or Town(s) in egistered
Name of Partners/Members	Business Ac	ldress	7	Title	% Owned
N/A					***************************************
		AND			

### General Information and Questionnaire Corporate Owners

Name of Facility	License No.	Report for Year	r Ended	Page of
Elim Park Baptist Home, Inc.	666c	9/30/2021		3A 37
If this facility is owned or operated as a corp	oration, provide	the following info	ormation:	
Legal Name of Corporation	Busii	ness Address	State(s) in W	hich Incorporated
				No. Shares
Name of Directors, Officers	Busin	ness Address	Title	Held by Each
				Tield by Edeli
See attached				
Names of Stockholders Owning at Least				
10% of Shares				
N/A				
				1

### ELIM PARK BAPTIST HOME, INC. BOARD OF DIRECTORS SEPTEMBER 2021

BOARD MEMBER	ADDRESS	BUSINESS
<b>Director &amp; Vice Chair</b> Brennan, Terrence	140 Cook Hill Road Cheshire, CT 06410	203-272-3547
<b>Director</b> Detzler, Wayne	140 Cook Hill Road Cheshire, CT 06410	203-272-3547
Director & Chair Ecker, Roberto	140 Cook Hill Road Cheshire, CT 06410	203-272-3547
Director & Treasurer Mason, Glenn	140 Cook Hill Road Cheshire, CT 06410	203-272-3547
Director & Immediate Past Chair Nelson, Chris	140 Cook Hill Road Cheshire, CT 06410	203-272-3547
<b>Director</b> Ponzani, Timothy	140 Cook Hill Road Cheshire, CT 06410	203-272-3547
Director & Secretary Swanson, Geoffrey	140 Cook Hill Road Cheshire, CT 06410	203-272-3547



State of Connecticut

Annual Report of Long-Term Care Facility

CSP-3B Rev. 10/2005

### General Information and Questionnaire Individual Proprietorship

Name of Facility	License No.	Report for Year Ended	Page of	f
Elim Park Baptist Home, Inc.	666c	9/30/2021	3B   37	
If this facility is owned or operated as an individua	l proprietorship, p	rovide the following informat	ion:	
Owi	ner(s) of Facility			-
	•			
N/A				
			***************************************	
			***************************************	
	Marine Control of the			
	-			
				_
				$\dashv$
				_
			***************************************	$\dashv$
				一
				╝

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### General Information and Questionnaire Related Parties\*

Name of Facility Elim Park Baptist Home, Inc.	e, Inc.	License No. 666	No. 666c	Report for Year Ended 9/30/2021		Page 4	of 37
Are any individuals rece marriage, ability to cont	Are any individuals receiving compensation from the facility related through marriage, ability to control, ownership, family or business association?	icility rel	ated through iation?	Yes O No	If "Yes," provide the Name/Address and complete the information on Page 11 of the report.	ne Name/Add nation on Pa	lress and ge 11 of the report.
Are any individuals or c including the rental of p related through family as	Are any individuals or companies which provide goods or services, including the rental of property or the loaning of funds to this facility, related through family association, common ownership, control, or business	or servic to this fa control,	es, cility, or business	⊙ Yes O No			•
association to any of the	association to any of the owners, operators, or officials of this facility?	of this fa	cility?		If "Yes," provide the following information:	e following	information:
		V 100			11.1. 11.11		
		Goods	Also Provides Goods/Services to		Indicate Where Costs are Included		
Name of Related	Business	Non-Re	Non-Related Parties	Description of Goods/Services	in Annual Report	Cost	Actual Cost to the
Individual of Company	Address	Yes	No   %**	Provided	Page # / Line #	Reported	Related Party
Ellm Park Place - see attached note	150 Cook Hill Road, Cheshire, CT 06410	0	0	N/A	N/A		
CALTC	217 Avery Heights, Hartford, CT 06106	0	•	See attached	Page 16 Line 1m13	1,000	1,000
		0	•				
		0	0				
		0	•				
		0	•				
		0	•				
		0	•				
		0	•				

<sup>\*</sup> Use additional sheets if necessary.

\*\* Provide the percentage amount of revenue received from non-related parties.

Elim Park Baptist Home, Inc.

FYE: 09/30/2021

License#: 666C/1500H

Page 4

CALTC (Note: Group of Nonprofit Entities affiliated for the purpose of providing a seamless continuum of care across provider types. The Organization provides opportunities for managed care, group purchasing, and other cost saving measures.)

Elim Park Baptist Home, Inc. received a \$80,000 Member Distribution in December 2020. All such amount(s) are reported on Page 30 IV 8 and included in the "Miscellaneous Income" line on the Page 30 Attachment. They are not disallowed in the respective year's Medicaid Cost report.

Elim Park Place is the Independent Living Component of this CCRC Community.

There is one corporation with two operating divisions.

Financial Statements are prepared Individually and Consolidated.

Allocable costs for goods and services that benefit both operating divisions are allocated to each individual division based on various designated criteria, such as square footage, relative payroll costs, etc.

### General Information and Questionnaire Basis for Allocation of Costs

Name of Facility	License No		Report for Year Ended	Page of		
Elim Park Baptist Home, Inc.	666c		9/30/2021	5 37		
If the facility is licensed as CDH and/or RCH or provides AIDS or TBI services with special Medicaid rates, costs						
must be allocated to CCNH and RHNS as follow	ws:		<u>-</u>			
Item			Method of Allocation			
Dietary Nu			meals served to residents			
Laundry		Number of	pounds processed			
Housekeeping		Number of	square feet serviced			
		Number of	hours of routine care provided	d by EACH		
Nursing		employee c	lassification, i.e., Director (or	Charge Nurse),		
		Registered [	Nurses, Licensed Practical Nu	ırses, Aides and		
		Attendants				
Direct Resident Care Consultants		Number of	hours of resident care provide	d by EACH		
	specialist (See listing page 13)					
Maintenance and operation of plant		Square feet				
Property costs (depreciation)		Square feet				
Employee health and welfare	elfare Gross salaries					
Management services Appropriate cost center involved						
All other General Administrative expenses Total of Direct and Allocated Costs						
The preparer of this report must answer the following	owing quest	ions applica	able to the cost information pr	ovided.		
1. In the preparation of this Report, were all	O Yes	⊙ No	If "No," explain fully why suc	h allocation was		
costs allocated as required?			not made.			
Note: General & Administrative Expenses are al	llocated base	ed on patier	nt days which is consistant wit	th prior years		
which have been audited by DSS. See acompan	ying Cross-	Reference F	Report for further details conce	erning allocation		
of costs.						
2. Explain the allocation of related company exp	penses and a	ttach copy	of appropriate supporting data	ì.		
N/A						
3. Did the Facility appropriately allocate and se				ome cost centers?		
(e.g., Assisted Living, Home Health, Outpatie	ent Services,	, Adult Day	Care Services, etc.)			
	• Yes	O NO	If "No," explain fully why sucnot made.	h allocation was		

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### General Information and Questionnaire Leases (Excluding Real Property)

Operating Leases - Include all long-term leases for motor vehicles and equipment that have not been capitalized. Short-term leases or as needed rentals should not be included in these amounts.

should not be included in these amounts.							
Name of Facility			License No.	Report for Year Ended	ear Ended		Page of
Elim Park Baptist Home, Inc.			9999	9/30/2021			
	Related * to	d * to					
	Owners,	ers,					
	Opera	Operators,				Annual	
	Offi	Officers		Date of	Term of	Amount	Amount
Name and Address of Lessor	Yes	Š	Description of Items Leased	Lease**	Lease	of Lease	Claimed
Pitney Bowes	0	0	Postage Machine		1	3,539	1,838
Kyocera	0	0	Copiers & Printers	01/09/20	60 months	51,680	23,687
	0	•					
	0	0					
	0	0					
	0	0					
	0	0					
	0	0					
	0	0					
	0	0					
				1			

\* Refer to Page 4 for definition of related. If "Yes," transaction should be reported on Page 4 also. Is a Mileage Log Book Maintained for All Leased Vehicles?

Total \*\*\*

% •

O Yes

<sup>\*\*</sup> Attach copies of newly acquired leases.

<sup>\*\*\*</sup> Amount should agree to Page 22, Line 6e.



### Lease Agreement

Your I	Business Information =			Agreement Number
	egal Name of Lessee / DBA N			
	PARK BAPTIST HOME			Tax ID # (FEIN/TIN)
Sold-T	o: Address			
140 Cc	ook Hill Rd, Cheshire, CT, 0641	0-3736, US		
Sold-T	o: Contact Name	Sold-To: Contact Phone #	Sold-To: Account#	
Nicole	Tomczuk	2032723547	0011530357	
Bill-To	: Address			
140 Co	ok Hill Rd, Cheshire, CT, 0641	0-3736, US		
Bill-To	: Contact Name	Bill-To: Contact Phone #	Bill-To: Account#	Bill-To: Email
Nicole '	Tomczuk	2032723547	0011530357	ap@elimpark.org
Ship-T	o: Address			
140 Co	ok Hill Rd, Cheshire, CT, 0641	0-3736, US		
Ship-T	o: Contact Name	Ship-To: Contact Phone #	Ship-To: Account#	
Nicole T	Tomczuk	2032723547	0011530357	
PO#				
		M. W.		
Your E	Business Needs			
Qty	Item	<b>Business Solution Description</b>		
1	SENDPROCAUTO	SendPro C Auto		
1	1E48	SP100 Label Printer		
1	1FXA	Interface to InView Dashboard		
1	7H00	C Series IMI Meter		
1	993-4B	DM400C Return Kit - Upgrade to 9H00		
1	APAC	Connect+ Accounting Weight Break Reports		
1	APAX	Cost Acctg Accounts Level (100)		
1	APB2	Cost Accounting Devices (10)		
1	APKN	Account List Import/Export		
1	C5CC	Sendpro C Auto 95	1.1	
	CAAB	Basic Cost Accounting		
	CDSF2	Cellular Subscription Fee SendPro C		
	CDSP	Cellular Device for SendPro Series - US		
	ERB4	eReturn Receipt Subscription - C Series		

	F9DA	USPS Special Services Training
1	F9DD	USPS Special Services Welcome Kit
1	F9PG2	PowerGuard LE Service Package
1	ME1A	Meter Equipment - C Series
	MFD0	MF Project Management <half day<="" td=""></half>
1	MP81	C Series Integrated Scale
1	MP8115	C-Series 15lb/7kg Upgrade
1	PAB1	C Series Premium App Bundle
1	PTJ1	SendPro Online
1	PTJ4	Multicarrier Sending App w/HW or Meler
1	PTJ8	SendPra Mailing Included W/ HW
1	PTJD	SendPro Office
1	NLT9	Single User Access
1	PTJR	50 User Access with Hardware or Meter
1	PTK1	Web Browser Integration
1	PTK2	SendPro C Series Shipping Integration
1	SJS2	Softguard For SendPro C500
	SMS3	Mailing-MailerID Assistance Service
1	STDSLA	Standard SLA-Equipment Service Agreement (for SendPro C Auto)
1	ZH24	Manual Weight Entry
1	ZH30	HZ03 120 LPM Speed
1	ZHC5	SendPro C500 Base System Identifier
1	ZHD5	USPS Rates with Metered Letter
1	ZHD7	E Conf Services for Metered LTR. BDL
1	ZHD8	Electronic Return Receipt
1	ZHD9	Retail Ground LOR
1	ZHWH	15fb/7kg Weighing Option for MP81

Initial Term: 63 months	Initial Payment Amount		( ) Tax Exempt Certificate Attached
Number of Months	Monthly Amount	Billed Quarterly at*	( ) Tax Exempt Certificate Not Required
63	\$ 294.92	\$ 884.76	(X) Purchase Power® transaction fees included
Does nat include any applicable sales, use.	or property taxes which will be billed separate	aly.	( ) Purchase Power® transaction fees extra
Your Signature Below			
of the Lease, including those condocumentation approval process	ntained in the SSA. The Lease will and an authorized PRGES emple	he binding on Pitney Rounc Clobal Since	t, Contract Number SV2610 ("SSA") between Vizient Supply, LLC and Pirporated by reference. You agree to be bound by all the terms and conditional Services, LLC ("PBGFS") only after PBGFS has completed its creditielther to provide proof of insurance or instead participate in the ValueM/tional fee.
Not Applicable State/Entity's Contract Lessee Signature	PC CFO	Pitney Bo	wes Signature
Print Name (Fig.) Title (G)	7/2021	Print Nam	
Email Address	Kork, Erg	Date	
ales Information		thomas.donaldsonvessels@pb.	COM
			WIII

### General Information and Questionnaire Accounting Basis

Name of Facility	License No.	Report for Year Ended		Page	of
Elim Park Baptist Home, Inc.	666c	9/30/2021		7 I	37
	eriod covered by this re	port were maintained on the following basis:			<del></del>
The records or this facility for the p	oriod covered by this re	port were maintained on the following basis.			
	Modified Cash				
Is the accounting basis for this					
-	V	YOUN THE THE			
[-	Yes	If "No," explain.			
previous period?	No				
Independent Accounting Firm			*******		
Name of Accounting Firm		Address (No. & Street, City, State, Zip Code)			····
1 Marcum LLP					
		555 Long Wharf Drive, New Haven, CT			
2 Marcum LLP		555 Long Wharf Drive, New Haven, CT			
3 Marcum LLP		555 Long Wharf Drive, New Haven, CT			
4 Marcum LLP		555 Long Wharf Drive, New Haven, CT	06511		
Services Provided by This Firm (de.	scribe fully )				************
1 A					
1 Annual Audit & Related Consulting			\$	39,980	
2 Medicaid Cost Report Review, Tax F	orm 990 Preparation		\$	5,315	
3 ERISA Audit of Benefit Plan & Relat	ed Consulting, Form 5500 Pr	eparation	\$	10,308	
4 Medicare Cost Report Preparation			\$	4,429	
			T		• • • •
			Charge to	r Services Pro	ovided
			\$	60,032	
		? If Yes, Specify Expense Classification and Line No.			
O Yes O No	Page 15, line 1d				
Legal Services Information					
Name of Legal Firm or Independent	Attorney		Telephone	Number	
1 See Attached Detail	•		See Attacl		
2			Sec / Ittaci	ica Detail	
3					
4					
5					
Address (No. & Street, City, State, Z	Cip Code )				
1 See Attached Detail					
2					
3					
4					
5					
Services Provided by This Firm (des	scribe fully)			·····	
control in the case of in the case					
1 See Attached Detail			\$	57,927	
2			\$		
3					
			\$		
4			\$		
5			\$		
			Charge for	Services Pro	vided
			-		
Are These Charges Paffacted in the Every	itura Dortion of This Dan	If Voc Specific Expanse Classification 111 N	\$	57,927	
		If Yes, Specify Expense Classification and Line No.			
⊙ Yes O No	Page 15, line 1e				

	Attachment Page 7	
Medicaid Provider #6668 & 1500H	NAME AND ADDRESS OF THE PARTY O	
FYE 9/30/21		
Legal Services Detail		
From October 1, 2020 Through Septemb	per 30, 2021	
Required To Be Shown On Page 7 of 2021 Med		
Legal Services Information		
Name of Legal Firm or Independent Attorney	Telephone Number	
1 Garrison, Levin-Epstein, Fitzgerald & Pirrotti, PC	(203) 777-4425	
2 Allied World Insurance Co.	(860) 284-1300	
3 Summa & Ryan PC	(203) 755-0390	
4 Jackson Lewis PC	(914) 514-6060	
5 Robinson & Cole LLP 6 Murtha Cullina LLP	(860) 275-8200	
7 Purcell, Flanagan, Hay & Greene, P.A.	(860) 240-6000 Ext 0000	
8 Sabatini And Associates, LLC	(904) 355-0355	
9 Finn Dixon & Herling	(860) 667-0839	
10 Legal Settlement Paid Directly To Employee, Elzbietta Thomas	(203) 325-5000 (860) 797-5337	
Address (No. & Street, City, State, Zip Code)	(660) 737-3337	-+
1 405 Orange Street, New Haven, CT 06511		
2 1690 New Britain Ave., Suite 101, Farmington, CT 06032		
3 228 Meadow Street Suite 303, Waterbury CT, 06702		-
4 P.O. Box 416019, Boston, MA 02241		
5 P.O. Box 1832, New Haven, CT 06508		
6 280 Trumbull Street, 12th Floor, Hartford, CT 06103-3469		
7 1548 Lancaster Terrace, Jacksonville, FL 32204		
8 1 Market Square, Newington, CT 06111		
9 6 Landmark Square, Stamford, CT 06901		
10 105 Orchard Street, Wallingford, CT 06492		$\perp$
Services Provided by This Firm (describe fully)		
Consultation/Representation re "Directors & Officers" Litigation	\$ 35,010	
Offset of Garrison, Levin-Epstein fees via payments from Insurance Company	\$ (29,385)	
Review/Consultation-General Matters & Employee Policy Questions	\$ 5,037	
4 Personnel & Labor Relations 5 Paviow/Consultation Control Matters, incl. Profit Index Control Agreement	\$ 14,579	
5 Review/Consultation-General Matters, incl. Draft Indep. Contractor Agreement 6 Review/Consultation-General Matters & Collections Of Resident Balances Owed	\$ 3,732	
Review/Consultation-General Matters & Collections Of Resident Balances Owed Independent Living Related (Disallowed)	\$ 9,651	
Independent Living Related (bisanowed)	\$ 6,006 \$ 7,315	
Consultation/Assistance-Paycheck Protection Program Loan Forgiveness	\$ 889	-+
10 Legal Settlement Paid Directly To Employee, Elzbietta Thomas	\$ 5,093	$\dashv$
	Charge for Services Provided	
	\$ 57,927	
Are These Charges Reflected in the Expenditure Portion of This Report? If Yes, Specify E	O' 'C' - ' - ' - ' - ' - ' - ' - ' -	

					THE PARTY OF TAMES			THE PROPERTY OF THE PROPERTY O
	TOTAL SECTION AND ASSESSMENT OF THE PROPERTY O	A THE POST OF THE		THE PROPERTY OF SELECTION AND AND ADDRESS OF THE PROPERTY OF T	DEI AILED LEGAL FEES SCHEDULE	DOLE		PERSONAL MARKET MARKET AND
	Name of the state		and a succession	AVERAGE AND A STATE OF THE STAT	TZOZ TWOCI I	40.400.000.000.000.000.000.000.000.000.		
TRX Date	Account Number	Account Description	Debit Amount	Vendor Name	Reference	Orig Doc#	Description	Section of the Community of the Communit
GAL FEES	LEGAL FEES - ADMINISTRATION	GL 1.8300.6420	1_					Comments &/M. Disposition
1/7/2021	1/7/2021 1.8300.6420	Legal Fees	(\$2,820.00)	(\$2,820.00) Allied World	Legal fees	CK#60760	Bank Transaction Entry	Reimbursements from the Insurance Company for Garrison
5/6/2021	5/6/2021 1.8300.6420	Legal Fees	(\$5,400.00)	(\$5,400.00) Allied World	Insurance Payment	CK#61983	Bank Transaction Entry	Reimbursements from the Instrance Company for Garrison
7/1/2021	1.8300,6420	Legal Fees	(\$4,710.00)	(\$4,710.00) AW Speciality Insurance Co	Insurance check	CK#62510	Bank Transaction Entry	Reimbursements from the Insurance Company for Garrison
10/8/2020 1.8300.6420	1.8300.6420	Legal Fees	(\$3,570.00)	(\$3,570.00) AW Speciality Insurance Compan	Payment	CK#60041	Bank Transaction Entry	Reimbursements from the Insurance Company for Garrison
9/3/2021	9/3/2021 1.8300.6420	Legal Fees	(\$1,020.00)	(\$1,020.00) AW specialt Insurance Company	Attorney cost	CK#63078	Bank Transaction Fotry	Reimbursements from the Insurance Company for Garrison
12/23/2020 1.8300.6420	1.8300.6420	Legal Fees	(\$1,125.00)	(\$1,125.00) AW Specialty Insurance Co	Legal Fees	CK#60619	Bank Transaction Fortry	Reimbursements from the Insurance Company for Garrison
6/4/2021	6/4/2021 1.8300.6420	Legal Fees	(\$2,010.00)	(\$2,010.00) AW Specialty Insurance Co	For legal fees	CK#62279	Bank Transaction Entry	Reimbursements from the Insurance Company for Garrison
2/4/2021 1	1.8300.6420	Legal Fees	(\$7,710.00)	(\$7,710.00) AW Specialty Insurance Company	Legal fees	CK361124	Bank Transaction Entry	Reimhursements from the Insurance Company for Carricon
7/29/2021 1.8300.6420	1.8300.6420	Legal Fees	(\$1,020.00)	(\$1,020.00) AW Specialty Insurance Company	payment	CK#62643	Bank Transaction Futry	Reimbursements from the Insurance Company for Garrion
11/1/2020 1	1.8300.6420	Legal Fees	\$712.80	FINN DIXON & HERLING	SERVICES, PPP LOAN	156458	Purchases	Assistance with the PPP loan - Loan is foreiven
4/1/2021 1	1.8300.6420	Legal Fees	\$176.18	FINN DIXON & HERLING	LEGAL SERVICES	158786	Purchases	Accistance with the PDP loan - Loan is foreiven
10/1/2020 1	1.8300.6420	Legal Fees	\$2,820.00		LEGAL FEES, OCT 20	3712018-00M 100120	Purchases	Reimburged by AW Coerielty Ingurance Communic
12/21/2020 1	1.8300.6420	Legal Fees	\$7,710.00	GARRISON, LEVIN-EPSTEIN, FITZGE	3712018-00M, LEGAL SER, DEC 20	122120	Purchases	Reimburged by AM Contable formance Company
1/29/2021	1.8300.6420	Legal Fees	\$5.400.00		3712018-00M LEGAL SER IAN 21	12021	Direcharge	Parish and A AM Specially Insurance Company
	1.8300.6420	Pepal Fees	\$2 160 02		FGAI CENVICES COD 21	12521	ruiciiases	Reimbursed by Aw Specialty Insurance Company
	1.8300.6420	Page Faac	\$4 710 00		LEGAL SERVICES, FEB. 21	17977	Purenases	Keimbursed by AW Specialty Insurance Company
4/30/2021	1 8300 6420	Logal Foor	\$2,010.00	CABBISON LEVIN COSTCIN CITTOR	LEGAL SERVICES, WANCH ZI	3/12U18-UUM, U33121	Purchases	Reimbursed by AW Specialty Insurance Company
	5/28/2021 1 8300 6420	Legal reco	22,010.00		LEGAL SEKVICES, APRIL 21	3/12018-00M, 043021	Purchases	Reimbursed by AW Specialty Insurance Company
6/30/2021	1 8300 6420	Legal Food	\$1,020.00		3/12018-UUM, MAY 21	52821	Purchases	Reimbursed by AW Specialty Insurance Company
	9300.6420	Legal rees	\$1,020.00		LEGAL SERVICES, JUNE 21	3712018-00M, 063021	Purchases	Reimbursed by AW Specialty Insurance Company
9/30/2021	1 8300 6420	Legal rees	\$2,220.00		3/12018-00M, JULY 21	83121	Purchases	Reimbursed by AW Specialty Insurance Company
/29/2020	10/29/2020 1 8300 6420	Legal rees	2774 50	MAIIDELIA CILLIMA LIB	3/12018-00MI, SEPT. 21	93021	Purchases	Reimbursed by AW Specialty Insurance Company
/15/2020 1	12/15/2020 1 8300 6420	Legal Food	\$573.50		PROFESSIONAL SVS, UC I 2020	6/1089	Purchases	Collections on HC resident
2/17/2021 1	1,8300,6420	I ppal Fape	\$148.50	MIRTHA CITTINA 11P	PROFESSIONAL SERVICES	504423	Purchases	Collections on HC resident
	1.8300.6420	legal Faes	\$2 203 00		DBOE SERVICES AAABCH 34	0010/4	Purchases	Medicare/Managed Medicare Copay questions
4/30/2021	1 8300 6420	legal Foor	¢E 11E CO	MONING COLLINA LLF	PROFESSION SERVICES, IMPACE ZI	689048	Purchases	Collections on HC resident
11/202/11	5/17/2021 1 8300 6420	Logal Food	53,113.00		PROF SERVICES, APRIL 21	693086	Purchases	Collections on HC resident
5/17/2021 1	1 8200 6420	Legal rees	\$156.00		PROF SERVICES	693088	Purchases	Collections on HC resident
117/2021	07.47.700.4 1.8000.0420	Legal rees	\$136.00		PROF SERVICES	693089	Purchases	Collections on HC resident
1,100/11/2	1 8300 6420	Legal rees	\$134.00		PROF SERVICES	693090	Purchases	Collections on HC resident
1707/11	6200 6420	regal rees	\$195.00		PROF SERVICES	693087	Purchases	Collections on HC resident
1707/07/	7/20/2021 1.6300.6420	regal rees	\$165.00	MUKIHA CULLINA LLP	PROFESSIONAL SERVICES	698434	Purchases	EEO Reporting question
	1.8300.5420	Legal rees			EMPLOYMENT COUNSELING	50300430	Purchases	Annual financial audit review
7/1/2021	1.8300.8420	Legal Fees	\$1/5.00	ROBINSON & COLE LLP	EMPLOYMENT COUNSELING	50338687	Purchases	HR FSLA assistance
//1/2021 1	7/1/2021 1.8300.6420	Legal Fees	\$280.50		EMPLOYMENT COUNSELING	50304003	Purchases	Annual financial audit review
7/1/2021 1	1.8300.6420	Legal Fees	\$375.00		EMPLOYMENT COUNSELING	50335654	Purchases	Mandatory vaccination review
//1/2021 1	//1/2021 1.8300.6420	Legal Fees	\$592.75		EMPLOYMENT COUNSELING	50317946	Purchases	Draft Independent Contractor agreement
9/21/2021 1	1.8300.6420	Legal Fees			REVIEW DOCKET, LEGAL SERVICES	50354444	Purchases	Employment matter unresolved at this time
	.8300.6420	Legal Fees	\$600.00	ROBINSON & COLE LLP	VACCINATION POLICIES, LEGAL SV	50354437	Purchases	Draft Vaccination Policy
9/21/2021 1	1.8300.6420	Legal Fees			REAL ESTATE GROUP, LEGAL SVS	50354438	Purchases	Should not have been paid - disallow
	.8300.6420	Legal Fees	\$435.00	SUMMA & RYAN PC	TELEPHONE CONF.	4825	Purchases	Workplace violence review
9/1/2021 1	1.8300.6420	Legal Fees		SUMMA & RYAN PC	REVIEW/EMAILS WITH JG	4853	Purchases	HR Policy questions including vaccination requirement
8/31/2021 1.8300.6420	8300.6420	Legal Fees	\$435.00	SUMMA & RYAN	AUG 21, AP ACCRUAL ENTRIES		SUMMA & RYAN	Offset
9/1/2021 1	1.8300.6420	Legal Fees	(\$435.00)	(\$435.00) SUMMA & RYAN	AUG 21, AP ACCRUAL ENTRIES		SUMMA & RYAN	Offset
			\$21,492.43		THE PROPERTY OF THE PROPERTY O			
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AAL FEES	14 2001 1 2000 CAS	ES			- The state of the			
1/1/2021 1.8900.6420	.8900.6420	Legal Fees- HR	\$5,092.64	AS	AGREEMENT, JAN. 2021	10121	Purchases	Discrimination Lawsuit settled - Disallow 50%
10/1/2020 1.8900.6420	8900.6420	Legal Fees- HR	(\$465.92)	(\$465.92) JACKSON LEWIS	ADDITIONAL SEPT 2020 ACCRUALS		IACKSON I FWIS	Discussion between the country of Discussion of Control
10/1/2020 1 8900 6420	0000							Coscillation tawsult settled - Disallow 50%

Third   Major   Major   Amount   Westerfring   Major								
Machine   Description   Desc					PETAILED LEGAL FEES SCHE FISCAL 2021	DOLE		
Exemple   1982   20   20   20   20   20   20   20		Account	Debit					
Intelliferen Hill   18,1318.3]   Incodor Lewis   Additional, \$170.000 ACCOMALY   Microbial Region   Description Language   Additional Legis   Region   Reg		Description	Amount	Vendor Name	Reference	Orig Doc#	Description	Comments &/or Disposition
Liggif Feen HR         (\$1514.5.2)   LACCON LEWIS         ADDITIONAL SET 2000 ACCIVILALS         JACCON LEWIS           Liggif Feen HR         (\$1514.5.2)   LACCON LEWIS FOR THOUSE CONTROLLS         THOUNAS, ELEBER A. 2325         7332399         PAPEL PRESS           Liggif Feen HR         \$551.5.6.2   LACCON LEWIS FC         THOUNAS, ELEBER A. 2325         7342322         PAPEL PRESS           Liggif Feen HR         \$551.5.6.2   LACCON LEWIS FC         THOUNAS, ELEBER A. 2325         7342322         Papel Press           Liggif Feen HR         \$51.9.0.5.2   LACCON LEWIS FC         THOUNAS, ELEBER A. 2325         7458222         Papel Press           Liggif Feen HR         \$51.9.0.5.2   LACCON LEWIS FC         THOUNAS, ELEBER A. 2325         7458222         Papel Press           Liggif Feen HR         \$51.9.0.5.2   LACCON LEWIS FC         THOUNAS, ELEBER A. 2325         7460200         Papel Press           Liggif Feen HR         \$51.9.0.5.2   LACCON LEWIS FC         THOUNAS, E. 28820, DATE A. 23243         Papel Press         Papel Press           Liggif Feen HR         \$51.9.0.5.2   LACCON LEWIS FC         THOUNAS, E. 28820, DATE A. 2325         Papel Press         Papel Press           Liggif Feen HR         \$51.9.0.5.2   LACCON LEWIS FC         THOUNAS, E. 28820, DATE A. 2325         Papel Press         Papel Press           Liggif Feen HR         \$51.0.5.0.0.0.0.0.0.0.0.0.0.	10/1/2020 1.8900.6420	Legal Fees- HR	(\$83.20)	JACKSON LEWIS	ADDITIONAL SEPT 2020 ACCRUALS		JACKSON LEWIS	Discrimination Lawsuit settled - Disallow 50%
Liggl Fees HR         \$553-450, JACKSON LEWUS         ADDITIONAS, ELZBIER J. 2335         7377599         PACKSON LEWUS           Liggl Fees HR         \$553-450, JACKSON LEWUS         THOMAS, ELZBIER J. 2335         7032277         PACKSON LEWUS           Liggl Fees HR         \$553-56, JACKSON LEWUS         THOMAS, ELZBIER J. 2335         7032327         PACKSON LEWUS           Liggl Fees HR         \$513-56, JACKSON LEWUS         THOMAS, ELZBIER J. 2335         7558929         PACKSON LEWUS           Liggl Fees HR         \$513-56, JACKSON LEWUS         THOMAS, ELZBIER J. 2335         7558929         PACKSON LEWUS           Liggl Fees HR         \$513-56, JACKSON LEWUS         THOMAS, ELZBIER J. 2335         7558939         PACKSON LEWUS           Liggl Fees HR         \$510-50, JACKSON LEWUS         THOMAS, ELZBIER J. 2335         7559399         PACKSON LEWUS           Liggl Fees HR         \$510-50, JACKSON LEWUS         THOMAS, ELZBIER J. 2335         PACKSON LEWUS         PACKSON LEWUS           Liggl Fees HR         \$510-50, JACKSON LEWUS         THOMAS, ELZBIER J. 2335         PACKSON LEWUS         PACKSON LEWUS           Liggl Fees HR         \$510-50, JACKSON LEWUS         THOMAS, ELZBIER J. 2335         PACKSON LEWUS         PACKSON LEWUS           Liggl Fees HR         \$510-50, JACKSON LEWUS         THOMAS, ELZBIER J. 2335         PACKSON LEWUS <td>10/1/2020 1.8900.6420</td> <td>Legal Fees- HR</td> <td>(\$1,915.52)</td> <td></td> <td>ADDITIONAL SEPT 2020 ACCRUALS</td> <td></td> <td>JACKSON LEWIS</td> <td>Discrimination Lawsuit settled - Disallow 50%</td>	10/1/2020 1.8900.6420	Legal Fees- HR	(\$1,915.52)		ADDITIONAL SEPT 2020 ACCRUALS		JACKSON LEWIS	Discrimination Lawsuit settled - Disallow 50%
Liggl Fee+ IR         \$483.0   JACKSON LEWIS C         THOMAS, ELEBER A. 2355         7337999         Purchases           Liggl Fee+ IR         \$515.84   JACKSON LEWIS C         THOMAS, ELEBER A. 2355         7321222         Purchases           Liggl Fee+ IR         \$519.54   JACKSON LEWIS C         THOMAS, ELEBER A. 2355         7323222         Purchases           Liggl Fee+ IR         \$519.54   JACKSON LEWIS C         THOMAS, ELEBER A. 2355         7329374         Purchases           Liggl Fee+ IR         \$119.15   JACKSON LEWIS C         THOMAS, ELEBER A. 2355         7329374         Purchases           Liggl Fee+ IR         \$119.15   JACKSON LEWIS C         THOMAS, ELEBER A. 2355         Purchases         Purchases           Liggl Fee+ IR         \$119.15   JACKSON LEWIS C         THOMAS, ELEBER A. 2385         Purchases         Purchases           Liggl Fee+ IR         \$119.15   JACKSON LEWIS C         THOMAS, ELEBER A. 2385         Purchases         Purchases           Liggl Fee+ IR         \$119.15   JACKSON LEWIS C         THOMAS, ELEBER A. 2385         Purchases         Purchases           Liggl Fee+ IR         \$119.15   JACKSON LEWIS C         THOMAS, ELEBER A. 2385         Purchases         Purchases           Liggl Fee+ IR         \$119.15   JACKSON LEWIS C         THOMAS, ELEBER A. 2385         Purchases         Purchases <td>10/1/2020 1.8900.6420</td> <td>Legal Fees- HR</td> <td>(\$554.56)</td> <td>JACKSON LEWIS</td> <td>ADDITIONAL SEPT 2020 ACCRUALS</td> <td></td> <td>JACKSON LEWIS</td> <td>Discrimination Lawsuit settled - Disallow 50%</td>	10/1/2020 1.8900.6420	Legal Fees- HR	(\$554.56)	JACKSON LEWIS	ADDITIONAL SEPT 2020 ACCRUALS		JACKSON LEWIS	Discrimination Lawsuit settled - Disallow 50%
Legal Fees- File   \$53.55 M   ALCHONOL HUNG FC   THOMAS, ELIZIERT - 2385   7382874   Purchases   Purchases   Legal Fees- File   \$53.55 M   ALCHONOL HUNG FC   THOMAS, ELIZIERT - 2385   7382874   Purchases   Purchases   Legal Fees- File   \$51.31 SE   ALCHON LUNG FC   THOMAS, ELIZIERT - 2385   7382874   Purchases   Purchases   Legal Fees- File   \$51.31 SE   ALCHON LUNG FC   THOMAS, ELIZIERT - 2385   7382939   Purchases   Legal Fees- File   \$51.31 SE   ALCHON LUNG FC   THOMAS, ELIZIERT - 2385   7382939   Purchases   Legal Fees- File   \$51.31 SE   ALCHON LUNG FC   THOMAS, ELIZIERT - 2385   7382939   Purchases   Legal Fees- File   \$51.32 SE   ALCHON LUNG FC   THOMAS, ELIZIERT - 2385   ALCHON FC   THOMAS, ELIZIERT -	10/1/2020 1.8900.6420	Legal Fees- HR	\$83.20	JACKSON LEWIS PC	THOMAS, ELZBIETA - 3285	7337369	Purchases	Discrimination Lawsuit settled - Disallow 50%
Ligati Fees- Hit   \$553.55   MARCON LEWIS FC   THOMAS, ELIZIER P. 2385   7582824   Purchases   Ligati Fees- Hit   \$553.55   MARCON LEWIS FC   THOMAS, ELIZIER P. 2385   7582824   Purchases   Ligati Fees- Hit   \$513.52   MARCON LEWIS FC   REPUBLISHEN 2385   7582829   Purchases   Purchases   Ligati Fees- Hit   \$513.52   MARCON LEWIS FC   REPUBLISHEN 259   7520103   Purchases   Purchases   Ligati Fees- Hit   \$513.52   MARCON LEWIS FC   THOMAS, E. 2880/TEMPORA   7520103   Purchases   Purchases   Ligati Fees- Hit   \$513.52   MARCON LEWIS FC   THOMAS, E. 2880/TEMPORA   7520103   Purchases   Ligati Fees- Hit   \$513.52   MARCON LEWIS FC   THOMAS, E. 2880/TEMPORA   7520103   Purchases   Ligati Fees- Hit   \$513.52   Purchases   Ligati Fees- Hit   \$513.52   Purchases   MARCON LEWIS FC   THOMAS, E. 2880/TEMPORA   7520004   MARCON LEWIS FC   MARCON LEWIS FC   THOMAS, E. 2880/TEMPORA   7520004   MARCON LEWIS FC	10/1/2020 1.8900.6420	Legal Fees- HR	\$465.92	$\overline{}$	THOMAS, ELZBIETA - 3285	7032637	Purchases	Discrimination Lawsuit settled - Disallow 50%
Ligal Fees- HR   \$1,515.2   JANCKOON LEWIN FO   THOUNAS, ELENT A. 28824   Purchases   Purchases   Ligal Fees- HR   \$1,515.5   JANCKOON LEWIN FO   THOUNAS, ELSAN   7099047   Purchases   Ligal Fees- HR   \$1,513.6   JANCKOON LEWIN FO   THOUNAS, ELSAN   700119   Purchases   1099047   Pur	10/1/2020 1.8900.6420	Legal Fees- HR	\$515.84		THOMAS, ELZBIETA - 3285	7381282	Purchases	Discrimination Lawsuit settled - Disallow 50%
Legal Fees-HR 5.136.25   AMCKOSN LEWUS FO   FINOMS, E.108.02   7620103   Purchases	10/1/2020 1.8900.6420	Legal Fees- HR	\$554.56		THOMAS, ELZBIETA - 3285	7548824	Purchases	Discrimination Lawsuit settled - Disallow 50%
Ideal Fees-HR   \$13.13   AICCRON LEWIS FC   SERVICES ON 1273/170   7763139   Purchases	10/1/2020 1.8900.6420	Legal Fees- HR	\$1,915.52		THOMAS, ELZBIETA - 3285	7493047	Purchases	Discrimination Lawsuit settled - Disallow 50%
Legal Fees-HR   \$195.45   ANCESON LEWIS PC   FRANCES REVISE SERVICES (2017)   7702103   Purchases	11/30/2020 1.8900.6420	Legal Fees- HR	\$176.85		PROF SERVICES, 113020	7688099	Purchases	Discrimination Lawsuit settled - Disallow 50%
Legal Fees HR   \$195.52 BACKOON LEWIN PC   THOMASE, ESPROSA 1779959   Purchases   Legal Fees HR   \$105.000 JACKOON LEWIN PC   THOMASE, ESPROSA 17799593   Purchases   Legal Fees HR   \$56.259.86 JACKOON LEWIN PC   THOMASE, 238871   7758523   Purchases   Purchases   Legal Fees HR   \$512.52 D JACKOON LEWIN PC   THOMASE, 238871   7758523   Purchases   Purchases   Legal Fees HR   \$512.52 D JACKOON LEWIN PC   THOMASE, 238871   7758523   Purchases   Purchases   Legal Fees HR   \$512.52 D JACKOON LEWIN PC   REGIS MARKED THE LEWIN PC   7759 GOOIN, 40021   Purchases   Legal Fees HR   \$512.52 D JACKOON LEWIN PC   REGIS MARKED THE LEGAL PORT OF A 1759 GOOIN, 40021   Purchases   Legal Fees HR   \$512.52 D JACKOON LEWIN PC   REGIS MARKED THE LEGAL PORT OF A 1759 GOOIN, 40021   Purchases   Legal Fees HR   \$512.52 D JACKOON LEWIN PC   REGIS MARKED THE LEGAL PORT OF A 1759 GOOIN, 40021   Purchases   Legal Fees HR   \$512.52 D JACKOON LEWIN PC   REGIS MARKED THE LEGAL PORT OF A 1759 GOOIN, 40021   Purchases   Legal Fees HR   \$512.52 D JACKOON LEWIN PC   REGIS MARKED THE LEGAL PORT OF A 1759 GOOIN, 40021   Purchases   Legal Fees HR   \$512.52 D JACKOON LEWIN PC   REGIS MARKED THE LEGAL PORT OF A 1759 GOOIN, 40021   Purchases   Legal Fees HR   \$512.52 D JACKOON LEWIN PC   REGIS MARKED THE LEGAL PORT OF A 1759 GOOIN, 40021   Purchases   Legal Fees HR   \$512.52 D JACKOON LEWIN PC   REGIS MARKED THE LEGAL PORT OF A 1759 GOOIN, 40021   Purchases   Legal Fees HR   \$512.52 D JACKOON LEWIN PC   REGIS MARKED THE LEGAL PORT OF A 1759 GOOIN, 40021   Purchases   Legal Fees HR   \$512.52 D JACKOON LEWIN PC   REGIS MARKED THE LEGAL PORT OF A 1759 GOOIN, 40021   Purchases   Legal Fees HR   \$512.52 D JACKOON LEWIN PC   REGIS MARKED THE LEGAL PORT OF A 1759 GOOIN, 40021   Purchases   Legal Fees HR   \$512.52 D JACKOON LEWIN PC   REGIS MARKED THE LEGAL PORT OF A 1759 GOOIN, 40021   Purchases   Legal Fees HR   \$512.50 D JACKOON LEWIN PC   REGIS MARKED THE LEGAL PORT OF A 1755 GOOIN, 40021   Purchases   Legal Fees HR   \$512.50 D JACKOON LEWIN PC   REGIS	1/1/2021 1.8900.6420	Legal Fees- HR	\$113.18		SERVICES RENDERED	7620103	Purchases	Discrimination Lawsuit settled - Disallow 50%
Legal Fees HR   \$5620 Bit   DiCKON LEWIS PC   THOWASE 2 398571   398573   Purchases	1/25/2021 1.8900.6420	Legal Fees- HR	\$195.45		THOMAS, E. SERVICES ON 12/31/20	7704119	Purchases	Discrimination Lawsuit settled - Disallow 50%
Legal Fees-HR   \$57.238   AUCKSON LEWIS E   THOMAS, E. 388571   389571   Purchases   Legal Fees-HR   \$57.238   AUCKSON LEWIS E   THOMAS, E. 388571   3655563   Purchases   Legal Fees-HR   \$57.238   AUCKSON LEWIS E   PURCHASES   STATES OF PURCHASES   PURCHAS	7/1/2021 1.8900.6420	Legal Fees- HR	\$600.00		THOMAS, E./3285/062321	7798563	Purchases	Discrimination Lawsuit settled - Disallow 50%
Legal Fees- HR         512,32 JD PUNCELL, FLANAGON, HAN & GREE RELANDRE BANKE         9759-00.0M, 011221         Purchases           Legal Fees- HR         511,323 JD PUNCELL, FLANAGON, HAN & GREE RELANDRE BANKE         9759-00.0M, 011221         Purchases           Legal Fees- HR         511,022.00         PUNCELL, FLANAGON, HAN & GREE RELANDRE BANKE         9759-00.0M, 01221         Purchases           Legal Fees- HR         51,022.00         PUNCELL, FLANAGON, HAN & GREE BANKE ELEANOR         9759-00.0M, 00221         Purchases           Legal Fees- HR         51,022.00         PUNCELL, FLANAGON, HAN & GREE BANKE ELEANOR         9759-00.0M, 00221         Purchases           Legal Fees- HR         51,022.00         PUNCELL, FLANAGON, HAN & GREE BANKE, ELEANOR         9759-00.0M, 00221         Purchases           Legal Fees- HR         51,023.00         PUNCELL, FLANAGON, HAN & GREE BANKE, E. GAD21         9759-00.0M, 00221         Purchases           Legal Fees- HR         51,035.02         PUNCELL, FLANAGON, HAN & GREE BRAKE, E. GAD21         9759-00.0M, 00221         Purchases           Legal Fees- HR         51,035.02         PUNCELL, FLANAGON, HAN & GREE BRAKE, E. GAD21         9759-00.0M, 00221         Purchases           Legal Fees- HR         529-036         PUNCELL, FLANAGON, HAN & GREE BRAKE, E. GAD21         9759-00.0M, 00221         Purchases           Legal Fees- HR         5	7/1/2021 1.8900.6420	Legal Fees- HR	\$6,259.86		THOMAS, E. 398571	398571	Purchases	Discrimination Lawsuit settled - Disallow 50%
1282   Fees - HR   \$135.20   PURCELL, FLANAGAN, HAY & GREE [LEANOR BRAKE   9759-0010A, 01221   Purchases   1282   Fees - HR   \$135.20   PURCELL, FLANAGAN, HAY & GREE [LEANOR BRAKE   9759-0010A, 01221   Purchases   1282   Fees - HR   \$15.02.30   PURCELL, FLANAGAN, HAY & GREE   MARKEDTH FURNES-ASTOR   9759-0010A, 02021   Purchases   1282   Fees - HR   \$15.02.30   PURCELL, FLANAGAN, HAY & GREE   MARKEDTH FURNES-ASTOR   9759-0010A, 02021   Purchases   1282   Fees - HR   \$15.02.30   PURCELL, FLANAGAN, HAY & GREE   MARKEDTH FURNES-ASTOR   9759-0010A, 040921   Purchases   1282   Fees - HR   \$15.05.32   PURCELL, FLANAGAN, HAY & GREE   FURNES-ASTOR, M   9759-0010A, 040921   Purchases   1282   Fees - HR   \$15.05.32   PURCELL, FLANAGAN, HAY & GREE   FURNES-ASTOR, M   9759-0010A, APRIL 21   Purchases   1282   Fees - HR   \$15.05.32   PURCELL, FLANAGAN, HAY & GREE   FURNES-ASTOR, M   9759-0010A, APRIL 21   Purchases   1282   Fees - HR   \$15.05.32   PURCELL, FLANAGAN, HAY & GREE   FURNES-ASTOR, M   9759-0010A, APRIL 21   Purchases   1282   Fees - HR   \$15.05.32   PURCELL, FLANAGAN, HAY & GREE   FURNES-ASTOR, M   9759-0010A, APRIL 21   Purchases   1282   Fees - HR   \$15.05.32   PURCELL, FLANAGAN, HAY & GREE   FURNES-ASTOR, M   9759-0010A, GRIZ 21   Purchases   1282   Fees - HR   \$15.05.32   PURCELL, FLANAGAN, HAY & GREE   FURNES-ASTOR, M   9759-0010A, GRIZ 21   Purchases   1282   Fees - HR   \$15.05.32   PURCELL, FLANAGAN, HAY & GREE   FURNES-ASTOR, M   9759-0010A, GRIZ 21   Purchases   1282   Fees - HR   \$15.05.32   PURCELL, FLANAGAN, HAY & GREE   FURNES-E, MAY   \$10.000, GRIZ 21   Purchases   1282   Fees - HR   \$10.000   PURCELL, FLANAGAN, HAY & GREE   FURNES-E, APRIL 21   PURCHASES   SUMMAR & RYAN   RCCON WITH BRYON   \$10.000   SUMMAR & RYAN   RCCON WITH BRYON   \$10.000   SUMMAR & RYAN   \$10.0	//1/2021 1.8900.6420	Legal Fees- HR	\$7,233.79	JACKSON LEWIS PC	THOMAS, E. 398571	7663563	Purchases	Discrimination Lawsuit settled - Disallow 50%
Legal Fees - HR   \$1,052.80   PURCELL, FLANAGAN, HAY & GREE [ELRANDE RRAKE   979-0010, 03221   Purchases   1299 Fees - HR   \$1,052.80   PURCELL, FLANAGAN, HAY & GREE [ELRANDE RRAKE   979-0010, 03221   Purchases   1299 Fees - HR   \$1,052.80   PURCELL, FLANAGAN, HAY & GREE [ELRANDE RRAKE   979-0010, 03221   Purchases   1299 Fees - HR   \$1,052.80   PURCELL, FLANAGAN, HAY & GREE [ELRANDE RRAKE   979-0010, 040921   Purchases   1299 Fees - HR   \$1,052.80   PURCELL, FLANAGAN, HAY & GREE [CHRITES-ASTOR, M. O43021   979-0010, 040921   Purchases   1299 Fees - HR   \$1,055.20   PURCELL, FLANAGAN, HAY & GREE [VOID OPEN TX   979-0010, 040921   Purchases   1299 Fees - HR   \$1,055.20   PURCELL, FLANAGAN, HAY & GREE [VOID OPEN TX   979-0010, 040921   Purchases   1299 Fees - HR   \$1,055.20   PURCELL, FLANAGAN, HAY & GREE [VOID OPEN TX   979-0010, 040921   Purchases   1299 Fees - HR   \$1,055.20   PURCELL, FLANAGAN, HAY & GREE [VOID OPEN TX   979-0010, 051221   Purchases   1299 Fees - HR   \$1,055.20   PURCELL, FLANAGAN, HAY & GREE [VOID OPEN TX   979-0010, 051221   Purchases   1299 Fees - HR   \$1,055.20   PURCELL, FLANAGAN, HAY & GREE [VOID OPEN TX   979-0010, 051221   Purchases   1299 Fees - HR   \$1,055.20   PURCELL, FLANAGAN, HAY & GREE [VOID OPEN TX   979-0010, 051221   Purchases   1299 Fees - HR   \$1,059.00   PURCELL, FLANAGAN, HAY & GREE [VOID OPEN TX   979-0010, 051221   Purchases   1299 Fees - HR   \$1,059.00   PURCELL, FLANAGAN, HAY & GREE [VOID OPEN TX   979-0010, 051221   Purchases   1299 Fees - HR   \$1,059.00   PURCELL, FLANAGAN, HAY & GREE [VOID OPEN TX   979-0010, 051221   Purchases   1299 Fees - HR   \$1,059.00   PURCELL, FLANAGAN, HAY & GREE [VOID OPEN TX   979-0010, 051221   Purchases   1299 Fees - HR   \$1,059.00   PURCELL, FLANAGAN, HAY & GREE [VOID OPEN TX   979-0010, 051221   Purchases   1299 Fees - HR   \$1,059.00   PURCELL, FLANAGAN, HAY & GREE [VOID OPEN TX   979-0010, 050121   Purchases   1299 Fees - HR   \$1,059.00   PURCELL, FLANAGAN, HAY & GREE [VOID OPEN TX   979-0010, 050121   Purchases   1299 Fees - HR	1/12/2021 1.8900.6420	Legal Fees- HR	\$115.20		ELEANOR BRAKE	9759-001M, 011221	Purchases	Disallow all IL Related
Integrates	1/12/2021 1.8900.8420	Legal Fees- HK	\$379.20	PURCELL, FLANAGAN, HAY & GREE	MARIEDITH FUENTES-ASTOR	9759-000M, 011221	Purchases	Disallow all II. Related
Legal Fees - HR	3/22/2021 1.8900.6420	Legal Fees- HR	\$1,052.80		ELEANOR BRAKE	9759-001M, 032221	Purchases	Disallow all It Related
Legal Fees-HR   \$382.00   PURCELL, FLANAGAN, HAY & GREE   ENANGR   PURCHASES   PURCHEL FLANAGAN, HAY & GREE   PURCHES, STOTOR   PURCHEL FLANAGAN, HAY & GREE   PURCHES, STOTOR   \$759-000M, AGRIL 21   Purchases   Legal Fees-HR   \$357.60   PURCELL, FLANAGAN, HAY & GREE   PURCHES, STOTOR   \$759-000M, AGRIL 21   Purchases   Legal Fees-HR   \$377.60   PURCELL, FLANAGAN, HAY & GREE   PURCHES, STOTOR   \$759-000M, AGRIL 21   Purchases   Legal Fees-HR   \$579.60   PURCELL, FLANAGAN, HAY & GREE   PURCHES, STOTOR   \$759-000M, AGRIL 21   Purchases   Legal Fees-HR   \$579.60   PURCELL, FLANAGAN, HAY & GREE   PURCHES, STOTOR   \$759-000M, AGRIL 21   Purchases   Legal Fees-HR   \$579.60   PURCELL, FLANAGAN, HAY & GREE   PURCHES, STOTOR   \$759-000M, G612.21   Purchases   Legal Fees-HR   \$539.60   PURCELL, FLANAGAN, HAY & GREE   PURCHES, STOTOR   \$759-000M, G612.21   Purchases   Legal Fees-HR   \$539.60   PURCELL, FLANAGAN, HAY & GREE   PURCHES, STOTOR   \$759-000M, G612.21   Purchases   Legal Fees-HR   \$540.50   PURCELL, FLANAGAN, HAY & GREE   PURCHES, STOTOR   \$759-000M, G612.21   Purchases   Legal Fees-HR   \$540.50   PURCELL, FLANAGAN, HAY & GREE   PURCHES, STOTOR   \$759-000M, G612.21   Purchases   Legal Fees-HR   \$540.50   PURCHEL, FLANAGAN, HAY & GREE   PURCHES, STOTOR   \$759-000M, G612.21   Purchases   Legal Fees-HR   \$540.50   SUMMA & RYAN   ACCRUALS, STOTOR   \$759-001M, G60.21   Purchases   Legal Fees-HR   \$540.50   SUMMA & RYAN   ACCRUALS, STOTOR   \$759-001M, G60.21   Purchases   Legal Fees-HR   \$540.50   SUMMA & RYAN   ACCRUALS, STOTOR   \$759-001M, G60.21   SUMMA & RYAN   Back Out Journal Entry 8273   Purchases   Legal Fees-HR   \$540.50   SUMMA & RYAN   CONTRACE   \$750-001M, G60.21   SUMMA & RYAN   CONTRACE   \$750-001M, G60.21   SUMMA & RYAN   CONTRACE   \$750	3/22/2021 1.8900.6420	Legal Fees- HR	\$1,622.40		MARIEDITH FUENTES-ASTOR	9759-000M, 032221	Purchases	Disallow all IL Related
Legal Fees-HR   5387.50  PUNCELL, FLANAGAN, HAY & GREE   PUNCAGE, SASTON, M.   9759-000M, APRIL 21   Purchases	4/9/2021 1.8900.6420	Legal Fees- HR	\$239.36	PURCELL, FLANAGAN, HAY & GREE	BRAKE, ELEANOR	9759-001M, 040921	Purchases	Disallow all IL Related
Legal Fees- HR   (3.1.163.2)   PURCELL, FLANAGAN, HAY & GREE   Void Open Trx   9759-000M, APRIL 21   Purchases	4/9/2021 1.8900.6420	Legal Fees- HR	\$387.20	PURCELL, FLANAGAN, HAY & GREE	FUENTES-ASTOR, M.	9759-000M, 040921	Purchases	Disallow all IL Related
Legal Fees- HR         \$377.60         Punctell, FlunAndean, HAY & GREE (Void Open Tix Standard)         9759-000M, APRIL 21         Purchases           Legal Fees- HR         \$377.60         Punctell, FLANAGAN, HAY & GREE (FUENTES-ASTOR)         9759-000M, APRIL 21         Purchases           Legal Fees- HR         \$52.05 do PUNCELL, FLANAGAN, HAY & GREE (FUENTES-ASTOR)         M. APRIL 21         9759-001M, G51221         Purchases           Legal Fees- HR         \$529.04 OPINCELL, FLANAGAN, HAY & GREE (FUENTES-ASTOR)         M. APRIL 21         9759-001M, G51221         Purchases           Legal Fees- HR         \$529.04 OPINCELL, FLANAGAN, HAY & GREE (FUENTES-ASTOR)         9759-001M, G51221         Purchases           Legal Fees- HR         \$549.05 OP PUNCELL, FLANAGAN, HAY & GREE (FUENTES-ASTOR)         9759-001M, G5121         Purchases           Legal Fees- HR         \$549.05 OP PUNCELL, FLANAGAN, HAY & GREE (PAINTES-ASTOR)         9759-001M, G50121         Purchases           Legal Fees- HR         \$540.00 OPINCELL, FLANAGAN, HAY & GREE (PAINTES-ASTOR)         9759-001M, G50121         Purchases           Legal Fees- HR         \$540.00 OPINCELL, FLANAGAN, HAY & GREE (PAINTES-ASTOR)         9759-001M, G50121         Purchases           Legal Fees- HR         \$540.00 OPINCELL, FLANAGAN, HAY & GREE (PAINTES, MV. 20         DUNMAA & RYAN         SUMMAA & RYAN           Legal Fees- HR         \$5420.00 OPINARA & RYAN	4/30/2021 1.8900.6420	Legal Fees- HR	(\$977.60)	PURCELL, FLANAGAN, HAY & GREE	Void Open Trx	9759-000M, APRIL 21	Purchases	Disallow all IL Related
Legal Fees- HR         \$37,560 JUMAGAN, HAY & GREE FULKTS-ASTOR, M. 043021         9759-0010M, APRIL 21         Purchases           Legal Fees- HR         \$52,465 JUMAGAN, HAY & GREE FULKTES-ASTOR, M. APRIL 21         9759-001M, APRIL 21         Purchases           Legal Fees- HR         \$5204.40         PURCELL, FLANAGAN, HAY & GREE FURKTES, ATOR, M. APRIL 21         9759-001M, 051221         Purchases           Legal Fees- HR         \$5390.40         PURCELL, FLANAGAN, HAY & GREE FURKTES, ATOR, M. APRIL 21         9759-001M, 051221         Purchases           Legal Fees- HR         \$5405.00         PURCELL, FLANAGAN, HAY & GREE FURKTES, ASTOR, 071221         9759-001M, 051121         Purchases           Legal Fees- HR         \$5403.00         PURCELL, FLANAGAN, HAY & GREE FURKTES, ASTOR, 071221         9759-001M, 050121         Purchases           Legal Fees- HR         \$5403.00         PURCELL, FLANAGAN, HAY & GREE FURKTES, ASTOR, 071221         9759-001M, 050121         Purchases           Legal Fees- HR         \$5403.00         PURCELL, FLANAGAN, HAY & GREE FURKTES, ASTOR, 071221         9759-001M, 050121         Purchases           Legal Fees- HR         \$5436.00         SUMMAA & RYAN         ACCRUALS, DOV. 20         PURCHASES         SUMMAA & RYAN           Legal Fees- HR         \$3427.60         SUMMAA & RYAN         RECORD AP ACCRUALS, JUNE 21         ACRIA ASTOR         SUMMAA & RYAN </td <td>4/30/2021 1.8900.6420</td> <td>Legal Fees- HR</td> <td>(\$1,163.52)</td> <td>PURCELL, FLANAGAN, HAY &amp; GREE</td> <td>Void Open Trx</td> <td>9759-001M, APRIL 21</td> <td>Purchases</td> <td>Disallow all II. Related</td>	4/30/2021 1.8900.6420	Legal Fees- HR	(\$1,163.52)	PURCELL, FLANAGAN, HAY & GREE	Void Open Trx	9759-001M, APRIL 21	Purchases	Disallow all II. Related
Legal Fees- HR         \$1,535.20 PURCELL, FLANAGAN, HAY & GREE (BRAKE, E. 043021         9759-001M, APRIL 21         Purchases           Legal Fees- HR         \$590.40         PURCELL, FLANAGAN, HAY & GREE (BRAKE, E. APRIL 21         9759-001M, 051221         Purchases           Legal Fees- HR         \$1990         PURCELL, FLANAGAN, HAY & GREE (BRAKE, E. MAY 21         9759-001M, 051221         Purchases           Legal Fees- HR         \$1990         PURCELL, FLANAGAN, HAY & GREE (BRAKE, E. MAY 21         9759-001M, 061121         Purchases           Legal Fees- HR         \$403.00         PURCELL, FLANAGAN, HAY & GREE (MAY 2012)         9759-001M, 061121         Purchases           Legal Fees- HR         \$5403.00         PURCELL, FLANAGAN, HAY & GREE (Void Open TYC 071921         9759-001M, 080121         Purchases           Legal Fees- HR         \$5403.00         PURCELL, FLANAGAN, HAY & GREE (Void Open TYC 071202         9759-001M, 080121         Purchases           Legal Fees- HR         \$5403.00         SUMMAA & RYAN         ACCRUALS, OU. 20         SUMMAA & RYAN           Legal Fees- HR         \$5403.00         SUMMAA & RYAN         ACCRUALS, NOV. 20         SUMMAA & RYAN           Legal Fees- HR         \$5403.00         SUMMAA & RYAN         RECORD AP ACCRUALS, JUNE 21         SUMMAA & RYAN           Legal Fees- HR         \$5403.00         SUMMAA & RYAN	4/30/2021 L.8900.6420	Legal Fees- HR	\$977.60	PURCELL, FLANAGAN, HAY & GREE	FUENTES-ASTOR, M. 043021	9759-000M, APRIL 21	Purchases	Disallow all IL Related
Legal Fees-HR   \$590.416   PURCELL, FLANAGAN, HAY & GREE FURFITS-ASTOR, M. AFRIL 21   9759-000M, 051221   Purchases	4/3U/2U21 1.89U0.642U	Legal Fees- HR	\$1,163.52	PURCELL, FLANAGAN, HAY & GREE	BRAKE, E. 043021	9759-001M, APRIL 21	Purchases	Disallow all IL Related
Legal Fees- HR         \$3924.16 PURCELL, FLANAGAN, HAY & GREE BRAKE, E. APRIL 21         9759-001M, 051221         Purchases           Legal Fees- HR         \$199.00 PURCELL, FLANAGAN, HAY & GREE FURNTES, M. MAY 21         9759-000M, 061121         Purchases           Legal Fees- HR         \$493.00 PURCELL, FLANAGAN, HAY & GREE FURNTES-ASTOR, 071921         9759-001M, 061121         Purchases           Legal Fees- HR         \$493.00 PURCELL, FLANAGAN, HAY & GREE FURNTES-ASTOR, 071921         9759-001M, 061121         Purchases           Legal Fees- HR         \$403.00 PURCELL, FLANAGAN, HAY & GREE FURNTES-ASTOR, 071921         9759-001M, 061121         Purchases           Legal Fees- HR         \$73.14.72 SABATINI AND ASSOCIATES, LLC         THOMAS, ELZBIETA SETTLEMENT         10121         Purchases           Legal Fees- HR         \$649.60 SUMMA & RYAN         ACCRUALS, NOV. 20         SUMMA & RYAN         SUMMA & RYAN         ACCRUALS, NOV. 20         SUMMA & RYAN           Legal Fees- HR         \$649.60 SUMMA & RYAN         ACCRUALS, NOV. 20         SUMMA & RYAN         SUMMA & RYAN         SUMMA & RYAN         SUMMA & RYAN         RECORD AP ACCRUALS, JUNE 21         SUMMA & RYAN           Legal Fees- HR         \$347.60 SUMMA & RYAN         BACK OUT JOURN BY 2035         ACCRUALS, JUNE 21         SUMMA & RYAN           Legal Fees- HR         \$417.60 SUMMA & RYAN PC         CORN WITH BR/CWA         AGES <td>5/12/2021 1.8900.6420</td> <td>Legal Fees- HR</td> <td>\$590.40</td> <td>PURCELL, FLANAGAN, HAY &amp; GREE</td> <td>FUENTES-ASTOR, M. APRIL 21</td> <td>9759-000M, 051221</td> <td>Purchases</td> <td>Disallow all IL Related</td>	5/12/2021 1.8900.6420	Legal Fees- HR	\$590.40	PURCELL, FLANAGAN, HAY & GREE	FUENTES-ASTOR, M. APRIL 21	9759-000M, 051221	Purchases	Disallow all IL Related
Legal Fees - HR         \$199 Of PURCELL, FLANAGAN, HAY & GREE RAND 21         9759-000M, 061121         Purchases           Legal Fees - HR         \$496.00         PURCELL, FLANAGAN, HAY & GREE RAND 21         9759-001M, 061121         Purchases           Legal Fees - HR         \$490.00         PURCELL, FLANAGAN, HAY & GREE RAND 2710S, 071921         9759-001M, 061121         Purchases           Legal Fees - HR         \$403.00         PURCELL, FLANAGAN, HAY & GREE FORD 371921         9759-001M, 061121         Purchases           Legal Fees - HR         \$57.314.72         SABATINI AND ASSOCIATES, LLC         THOMAS, ELZBIETA SETTLEMENT         10.121         Purchases           Legal Fees - HR         \$56.96         SUMMA & RYAN         ACCRUALS, NOV. 20         SUMMA & RYAN           Legal Fees - HR         \$649.60         SUMMA & RYAN         ACCRUALS, NOV. 20         SUMMA & RYAN           Legal Fees - HR         \$417.60         SUMMA & RYAN         RECORD AP ACCRUALS, JUNE 21         SUMMA & RYAN           Legal Fees - HR         \$362.50         SUMMA & RYAN         RECORD AP ACCRUALS, JUNE 21         SUMMA & RYAN           Legal Fees - HR         \$315.00         SUMMA & RYAN PC         CONF WITH BB/CW         4668         Purchases           Legal Fees - HR         \$3145.00         SUMMA & RYAN PC         FEMPHONE CONF WITH RAPADA	5/12/2021 1.8900.6420	Legal Fees- HR	\$924.16	PURCELL, FLANAGAN, HAY & GREE	BRAKE, E. APRIL 21	9759-001M, 051221	Purchases	Disallow all IL Related
Legal Fees- HR         \$496.00         PURCELL, EAMAGAN, HAY & GREE FUNNTES-ASTON, 071921         9759-001M, 061121         Purchases           Legal Fees- HR         \$490.00         PURCELL, FLANAGAN, HAY & GREE FUNNTES-ASTON, 071921         9759-001M, 080121         Purchases           Legal Fees- HR         \$7,314.72         SABATINI AND ASSOCIATES, LLC         THOMAS, ELZBIETA SETILEMENT         10121         Purchases           Legal Fees- HR         \$7,314.72         SABATINI AND ASSOCIATES, LLC         THOMAS, ELZBIETA SETILEMENT         10121         Purchases           Legal Fees- HR         \$649.60         SUMMA & RYAN         ACCRUALS, NOV. 20         SUMMA & RYAN         SUMMA & RYAN           Legal Fees- HR         \$417.60         SUMMA & RYAN         ACCRUALS, JUNE 21         SUMMA & RYAN         SUMMA & RYAN           Legal Fees- HR         \$417.60         SUMMA & RYAN         RECORD AP ACCRUALS, JUNE 21         SUMMA & RYAN           Legal Fees- HR         \$5417.60         SUMMA & RYAN         RECORD AP ACCRUALS, JUNE 21         SUMMA & RYAN           Legal Fees- HR         \$5405.60         SUMMA & RYAN         RECORD AP ACCRUALS, JUNE 21         SUMMA & RYAN           Legal Fees- HR         \$1407.60         SUMMA & RYAN PC         TELEPHONE CONF W/H R         4668         Purchases           Legal Fees- HR	6/11/2021 1.8900.6420	Legal Fees- HR	\$199.04	PURCELL, FLANAGAN, HAY & GREE	ASTOR-FUENTES, M. MAY 21	9759-000M, 061121	Purchases	Disallow all IL Related
Legal Fees- HR         \$403.00   PURCELL, FLANAGAN, HAY & GREE FURNTES-ASTOR, 071921         9759-001M, 080121         Purchases           Legal Fees- HR         \$503.00   PURCELL, FLANAGAN, HAY & GREE FURNTES-ASTOR LOGIST STITLEMENT         10121         Purchases           Legal Fees- HR         \$549.60   SUMMAA & RYAN         ACCRUALS, OCT 2020         SUMMAA & RYAN           Legal Fees- HR         \$649.60   SUMMAA & RYAN         ACCRUALS, NOV. 20         SUMMAA & RYAN           Legal Fees- HR         \$649.60   SUMMAA & RYAN         ACCRUALS, NOV. 20         SUMMAA & RYAN           Legal Fees- HR         \$542.60   SUMMAA & RYAN         ACCRUALS, NOV. 20         SUMMAA & RYAN           Legal Fees- HR         \$542.60   SUMMAA & RYAN         ACCRUALS, NOV. 20         SUMMAA & RYAN           Legal Fees- HR         \$362.50   SUMMAA & RYAN         RECORD AP ACCRUALS, SUMMA & RYAN         SUMMAA & RYAN           Legal Fees- HR         \$362.50   SUMMAA & RYAN         RECORD AP ACCRUALS, SUMMA & RYAN         Back Out Journal Entry 82736         SUMMAA & RYAN           Legal Fees- HR         \$1425.60   SUMMAA & RYAN PC         CONF WITH BB/CW         4668         Purchases           Legal Fees- HR         \$1425.60   SUMMAA & RYAN PC         TELEPHONE CONF, WITH RAPALA         4725         Purchases           Legal Fees- HR         \$1345.50   SUMMAA & RYAN PC         TELEPHONE CON	6/11/2021 1.8900.6420	Legal Fees- HR	\$496.00	PURCELL, FLANAGAN, HAY & GREE	BRAKE, E. MAY 21	9759-001M, 061121	Purchases	Disallow all It. Related
Legal Fees- HR         \$7,314.07         SABATINI AND & GREEI Void Open Trx         FORTING ORDITION         Purchases           Legal Fees- HR         \$7,314.07         SABATINI AND ASSOCIATES, LLC         THOMAS, ELZBIETA SETTLEMENT         1012.1         Purchases           Legal Fees- HR         \$649.60         SUMMA & RYAN         ACCRUALS, NOV. 20         SUMMA & RYAN           Legal Fees- HR         \$649.60         SUMMA & RYAN         ACCRUALS, NOV. 20         SUMMA & RYAN           Legal Fees- HR         \$417.60         SUMMA & RYAN         JAN 2021 ACCURALS         SUMMA & RYAN           Legal Fees- HR         \$417.60         SUMMA & RYAN         RECORD AP ACCRUALS, JUNE 21         SUMMA & RYAN           Legal Fees- HR         \$5649.60         SUMMA & RYAN         RECORD AP ACCRUALS, JUNE 21         SUMMA & RYAN           Legal Fees- HR         \$5649.60         SUMMA & RYAN         Back Out Journal Entry 82736         SUMMA & RYAN           Legal Fees- HR         \$145.00         SUMMA & RYAN PC         CONF WITH BB/CW         4668         Purchases           Legal Fees- HR         \$1435.60         SUMMA & RYAN PC         ELEPHONE CONF W/ HR ACH 21         4668         Purchases           Legal Fees- HR         \$1435.60         SUMMA & RYAN PC         TELEPHONE CONF W/ HR ACH 21         4668         P	8/1/2021 1.8900.6420	Legal Fees- HR	\$403.00	PURCELL, FLANAGAN, HAY & GREE	FURNTES-ASTOR, 071921	9759-001M, 080121	Purchases	Disallow all II. Related
Legal Fees- HR         \$73.43.72         SABATINI AND ASSOCIATES, LLC         THOMAS, ELZBIETA SETTLEMENT         1012.1         Purchases           Legal Fees- HR         \$649.60         SUMMAA & RYAN         ACCRUALS, OCT 2020         SUMMAA & RYAN           Legal Fees- HR         \$649.60         SUMMAA & RYAN         ACCRUALS, OUV. 20         SUMMAA & RYAN           Legal Fees- HR         \$437.60         SUMMAA & RYAN         ACCRUALS, OUV. 20         SUMMAA & RYAN           Legal Fees- HR         \$437.60         SUMMAA & RYAN         ACCRUALS, OUV. 20         SUMMAA & RYAN           Legal Fees- HR         \$362.50         SUMMAA & RYAN         RECORD AP ACCRUALS, JUNE 21         SUMMAA & RYAN           Legal Fees- HR         \$362.50         SUMMAA & RYAN         RECORD AP ACCRUALS, JUNE 21         SUMMAA & RYAN           Legal Fees- HR         \$362.50         SUMMAA & RYAN         RECORD AP ACCRUALS, JUNE 21         SUMMAA & RYAN           Legal Fees- HR         \$362.50         SUMMAA & RYAN PC         TELEPHONE CONF W/ HR         4668         Purchases           Legal Fees- HR         \$3145.60         SUMMAA & RYAN PC         TELEPHONE CONF, WR         4668         Purchases           Legal Fees- HR         \$362.50         SUMMAA & RYAN PC         TELEPHONE CONF, WR         4778         Purchases	9/24/2021 1.8900.6420	Legal Fees- HR	(\$403.00)	PURCELL, FLANAGAN, HAY & GREE	Void Open Trx	9759-001M, 080121	Purchases	Disallow all IL Related
Legal Fees- HR         \$649.60         SUMMA & RYAN         ACCRUALS, NOV. 20         SUMMA & RYAN           Legal Fees- HR         \$649.60         SUMMA & RYAN         ACCRUALS, NOV. 20         SUMMA & RYAN           Legal Fees- HR         \$649.60         SUMMA & RYAN         JAN 2021 ACCURALS         SUMMA & RYAN           Legal Fees- HR         \$362.50         SUMMA & RYAN         JAN 2021 ACCURALS         SUMMA & RYAN           Legal Fees- HR         \$362.50         SUMMA & RYAN         RECORD AP ACCURALS, JUNE 21         SUMMA & RYAN           Legal Fees- HR         \$362.50         SUMMA & RYAN         RECORD AP ACCURALS, JUNE 21         SUMMA & RYAN           Legal Fees- HR         \$362.50         SUMMA & RYAN         RECORD AP ACCURALS, JUNE 21         SUMMA & RYAN           Legal Fees- HR         \$145.00         SUMMA & RYAN         RECORD AP ACCRUALS, JUNE 21         SUMMA & RYAN           Legal Fees- HR         \$145.00         SUMMA & RYAN PC         CONF WITH BB/CW         4668         Purchases           Legal Fees- HR         \$145.00         SUMMA & RYAN PC         EEMAL/TELEPHONE CONF W/ HR         4668         Purchases           Legal Fees- HR         \$1436.60         SUMMA & RYAN PC         TELEPHONE CONF W/ HR         4725         Purchases           Legal Fees- HR	1/1/2021 1.8900.6420	Legal Fees- HR			THOMAS, ELZBIETA SETTLEMENT	10121	Purchases	Discrimination Lawsuit settled - Disallow 50%
Legal Fees- HR         \$649.60   SUMMA & RYAN         ACCRUALS, NOV. 20         SUMMA & RYAN           Legal Fees- HR         \$447.60   SUMMA & RYAN         JAN 2021 ACCURALS         SUMMA & RYAN           Legal Fees- HR         \$417.60   SUMMA & RYAN         JAN 2021 ACCURALS         SUMMA & RYAN           Legal Fees- HR         \$362.50   SUMMA & RYAN         RECORD AP ACCRUALS, JUNE 21         SUMMA & RYAN           Legal Fees- HR         \$362.50   SUMMA & RYAN         RECORD AP ACCRUALS, JUNE 21         SUMMA & RYAN           Legal Fees- HR         \$362.50   SUMMA & RYAN         RECORD AP ACCRUALS, JUNE 21         SUMMA & RYAN           Legal Fees- HR         \$145.00   SUMMA & RYAN         RECORD AP ACCRUALS, JUNE 21         SUMMA & RYAN           Legal Fees- HR         \$145.00   SUMMA & RYAN         CONF WITH BB/CW         4668         Purchases           Legal Fees- HR         \$145.00   SUMMA & RYAN PC         TELEPHONE CONF W/ HR         4683         Purchases           Legal Fees- HR         \$143.60   SUMMA & RYAN PC         EMAIL/TELEPHONE, MARCH 21         4725         Purchases           Legal Fees- HR         \$1345.60   SUMMA & RYAN PC         TELE CONF, WITH HR/FMIA         4772         Purchases           Legal Fees- HR         \$2362.50   SUMMA & RYAN PC         TELE CONF, DRUG TESTING         4876         Purchases </td <td>10/30/2020 1.8900.6420</td> <td>Legal Fees- HR</td> <td></td> <td></td> <td>ACCRUALS, OCT 2020</td> <td></td> <td>SUMMA &amp; RYAN</td> <td>Offset</td>	10/30/2020 1.8900.6420	Legal Fees- HR			ACCRUALS, OCT 2020		SUMMA & RYAN	Offset
Legal Fees- HR         (\$649.60) SUMMA & RYAN         ACCRUALS, NOV. 20         SUMMA & RYAN           Legal Fees- HR         (\$417.60) SUMMA & RYAN         JAN 2021 ACCURALS         SUMMA & RYAN           Legal Fees- HR         (\$456.50) SUMMA & RYAN         RECORD AP ACCRUALS, JUNE 21         SUMMA & RYAN           Legal Fees- HR         (\$5649.60) SUMMA & RYAN         RECORD AP ACCRUALS, JUNE 21         SUMMA & RYAN           Legal Fees- HR         (\$5649.60) SUMMA & RYAN         RECORD AP ACCRUALS, JUNE 21         SUMMA & RYAN           Legal Fees- HR         (\$145.00) SUMMA & RYAN         CONF WITH BB/CW         4668         Purchases           Legal Fees- HR         \$145.00 SUMMA & RYAN PC         TELEPHONE CONF W/ HR         4683         Purchases           Legal Fees- HR         \$145.00 SUMMA & RYAN PC         TELEPHONE CONF W/ HR         4683         Purchases           Legal Fees- HR         \$135.00 SUMMA & RYAN PC         TELEPHONE CONF W/ HR         4683         Purchases           Legal Fees- HR         \$1345.60 SUMMA & RYAN PC         TELEPHONE CONF W/ HR         4683         Purchases           Legal Fees- HR         \$1345.60 SUMMA & RYAN PC         TELECHONE CONF W/ HR         4748         Purchases           Legal Fees- HR         \$250.00 SUMMA & RYAN PC         TELE CONF, DRUG TESTING         4876         Purch		Legal Fees- HR			ACCRUALS, NOV. 20		SUMMA & RYAN	Offset
Legal Fees- HR         \$417.60 SUMMA & RYAN         JAN 2021 ACCURALS         SUMMA & RYAN           Legal Fees- HR         \$362.50 SUMMA & RYAN         RECORD AP ACCRUALS, JUNE 21         SUMMA & RYAN           Legal Fees- HR         \$3642.60 SUMMA & RYAN         RECORD AP ACCRUALS, JUNE 21         SUMMA & RYAN           Legal Fees- HR         \$145.00 SUMMA & RYAN         CONF WITH BB/CW         4668         Purchases           Legal Fees- HR         \$145.00 SUMMA & RYAN PC         TELEPHONE CONF W/ HR         4683         Purchases           Legal Fees- HR         \$135.00 SUMMA & RYAN PC         TELEPHONE CONF W/ HR         4683         Purchases           Legal Fees- HR         \$1345.00 SUMMA & RYAN PC         TELEPHONE CONF W/ HR         4683         Purchases           Legal Fees- HR         \$1345.60 SUMMA & RYAN PC         TELEPHONE CONF W/ HR         4725         Purchases           Legal Fees- HR         \$1345.60 SUMMA & RYAN PC         TELE CONF. WITH HR/FMIA         4772         Purchases           Legal Fees- HR         \$3502.50 SUMMA & RYAN PC         TELE CONF. WITH HR/FMIA         4876         Purchases           Legal Fees- HR         \$36434.55         SUMMA & RYAN PC         TELE CONF. DRUG TESTING         4876         Purchases	12/1/2020 1.8900.6420	Legal Fees- HR			ACCRUALS, NOV. 20		SUMMA & RYAN	Offset
Legal Fees- HR         (5417.60) SUMMA & RYAN         IAN 2021 ACCIRALS         SUMMA B RYAN           Legal Fees- HR         (5362.50) SUMMA R RYAN         RECORD AP ACCIVALS, JUNE 21         SUMMA B RYAN           Legal Fees- HR         (549.60) SUMMA R RYAN         Back Out Journal Entry 8236         SUMMA R RYAN           Legal Fees- HR         (549.60) SUMMA R RYAN PC         CONF WITH BB/CW         4668         Purchases           Legal Fees- HR         5145.00 SUMMA R RYAN PC         TELEPHONE CONF W/ HR         4683         Purchases           Legal Fees- HR         51.345.00 SUMMA R RYAN PC         EMAIL/TELEPHONE CONF W/ HR         4683         Purchases           Legal Fees- HR         51.345.00 SUMMA R RYAN PC         TELEPHONE CONF W/ HR         4683         Purchases           Legal Fees- HR         51.345.00 SUMMA R RYAN PC         TELEPHONE CONF, HR         4748         Purchases           Legal Fees- HR         5362.50 SUMMA R RYAN PC         TELE CONF. WITH HR/FMLA         4772         Purchases           Legal Fees- HR         5364.434.55         RAAN PC         TELE CONF. DRUG TESTING         4876         Purchases	1/31/2021 1.8900.6420	Legal Fees- HR	\$417.60	SUMMA & RYAN	JAN 2021 ACCURALS		SUMMA & RYAN	Offset
Legal Fees- HR         \$382.50 SUMMA & RYAN         RECORD AP ACCRUALS, JUNE 21         SUMMA & RYAN           Legal Fees- HR         \$(5849.60) SUMMA & RYAN         RECORD AP ACCRUALS, JUNE 21         SUMMA & RYAN           Legal Fees- HR         \$145.00 SUMMA & RYAN PC         CONF WITH BLYW         4668         Purchases           Legal Fees- HR         \$143.60 SUMMA & RYAN PC         EMAIL/TELEPHONE CONF W/ HR         4683         Purchases           Legal Fees- HR         \$1.345.60 SUMMA & RYAN PC         EMAIL/TELEPHONE CONF W/ HR         4725         Purchases           Legal Fees- HR         \$1.345.60 SUMMA & RYAN PC         TELEPHONE CONF, HR         4748         Purchases           Legal Fees- HR         \$36.50 SUMMA & RYAN PC         TELEPHONE CONF, HR         4748         Purchases           Legal Fees- HR         \$36.434.55         TELE CONF, DRUG TESTING         4876         Purchases	2/1/2021 1.8900.6420	Legal Fees- HR	(\$417.60)	SUMMA & RYAN	JAN 2021 ACCURALS		SUMMA & RYAN	Offset
Legal Fees- HR         (5362-50) SUMMA & RYAN         RECORD AP ACCRUALS, JUNE 21         SUMMA & RYAN           Legal Fees- HR         (5649-60) SUMMA & RYAN         Back Out Journal Entry 82736         5UMMA & RYAN           Legal Fees- HR         5145-00 SUMMA & RYAN PC         CONF WITH BB/CW         4668         Purchases           Legal Fees- HR         5417-60 SUMMA & RYAN PC         FELEPHONE CONF W/ HR         4683         Purchases           Legal Fees- HR         5143-5.00 SUMMA & RYAN PC         TELEPHONE CONF, HR         4725         Purchases           Legal Fees- HR         536,250 SUMMA & RYAN PC         TELE CONF, WITH HR/FMLA         4772         Purchases           Legal Fees- HR         5200.00 SUMMA & RYAN PC         TELE CONF, DRUG TESTING         4876         Purchases	6/30/2021 1.8900.6420	Legal Fees- HR			RECORD AP ACCRUALS, JUNE 21		SUMMA & RYAN	Offset
Legal Fees- HR         (\$649.60)         SUMMAA & RYAN         Back Out Journal Entry 82736         SUMMAA & RYAN           Legal Fees- HR         \$145.00         SUMMAA & RYAN PC         CONF WITH BB/CW         4668         Purchases           Legal Fees- HR         \$417.60         SUMMAA & RYAN PC         TELEPHONE CONF W/ HR         4683         Purchases           Legal Fees- HR         \$1345.60         SUMMAA & RYAN PC         TELEPHONE CONF, HR         4725         Purchases           Legal Fees- HR         \$1345.60         SUMMAA & RYAN PC         TELE CONF, HR         4772         Purchases           Legal Fees- HR         \$220.00         SUMMAA & RYAN PC         TELE CONF, DRUG TESTING         4876         Purchases           \$36,434.55         Legal Fees- HR         \$36,434.55         SUMMAA & RYAN PC         TELE CONF, DRUG TESTING         4876         Purchases		Legal Fees- HR	(\$362.50)	SUMMA & RYAN	RECORD AP ACCRUALS, JUNE 21		SUMMA & RYAN	Offset
Legal Fees- HR         \$145.00         SUMMAA & RYAN PC         CONF WITH BB/CW         4668         Purchases           Legal Fees- HR         \$417.60         SUMMAA & RYAN PC         TELEPHONE CONF W/ HR         4683         Purchases           Legal Fees- HR         \$417.60         SUMMAA & RYAN PC         EMAIL/TELEPHONE CONF, HR         4725         Purchases           Legal Fees- HR         \$356.25         SUMMAA & RYAN PC         TELE CONF, HR         4772         Purchases           Legal Fees- HR         \$2200.00         SUMMAA & RYAN PC         TELE CONF, WITH HR/FMLA         4772         Purchases           Legal Fees- HR         \$2300.00         SUMMAA & RYAN PC         TELE CONF, DRUG TESTING         4876         Purchases	9/30/2021 1.8900.6420	Legal Fees- HR	(\$649.60)	SUMMA & RYAN	Back Out Journal Entry 82736		SUMMA & RYAN	Offset
Legal Fees- HR         \$417.60         SUMMAA & RYAN PC         TELEPHONE CONF W/ HR         4683         Purchases           Legal Fees- HR         \$881.60         SUMMAA & RYAN PC         EMAIL/TELEPHONE, MARCH 21         4725         Purchases           Legal Fees- HR         \$1,345.60         SUMMAA & RYAN PC         TELEPHONE CONF, HR         4748         Purchases           Legal Fees- HR         \$350.00         SUMMAA & RYAN PC         TELE CONF, WITH HR/FMIA         4772         Purchases           Legal Fees- HR         \$350.00         SUMMAA & RYAN PC         TELE CONF, DRUG TESTING         4876         Purchases	12/6/2020 1.8900.6420	Legal Fees- HR			CONF WITH BB/CW	4668	Purchases	Handbook related questions
Legal Fees- HR         \$881.60         SUMMA & RYAN PC         EMAIL/TELEPHONE, MARCH 21         4725         Purchases           Legal Fees- HR         \$1.345.60         SUMMA & RYAN PC         TELEPHONE CONF, HR         4748         Purchases           Legal Fees- HR         \$350.50         SUMMA & RYAN PC         TELE CONF, WITH HR/FMIA         4772         Purchases           Legal Fees- HR         \$36,434.55         ANAMA & RYAN PC         TELE CONF, DRUG TESTING         4876         Purchases	2/31/2020 1.8900.6420	Legal Fees- HR			TELEPHONE CONF W/ HR	4683	Purchases	HR related questions
Legal Fees-HR         \$1.345.60 SUMMA & RYAN PC         TELECHONE CONF, HR         4748         Purchases           Legal Fees-HR         \$362.50 SUMMA & RYAN PC         TELE CONF. WITH HR/FMLA         4772         Purchases           Legal Fees- HR         \$290.00 SUMMA & RYAN PC         TELE CONF. DRUG TESTING         4876         Purchases           \$36,434.55         ARAN PC         TELE CONF. DRUG TESTING         4876         Purchases	3/9/2021 1.8900.6420	Legal Fees- HR			EMAIL/TELEPHONE, MARCH 21	4725	Purchases	Severence Document
Legal Fees- HR         \$362.50         SUMMA & RYAN PC         TELE CONF, WITH HR/FMLA         4772         Purchases           Legal Fees- HR         \$290.00         SUMMA & RYAN PC         TELE CONF, DRUG TESTING         4876         Purchases           \$36,434.55         \$36,434.55         Purchases         Purchases	4/13/2021 1.8900.6420	Legal Fees- HR			TELEPHONE CONF, HR	4748	Purchases	Severence Document
Legal Fees- HR         \$290.00         SUMMA & RYAN PC         TELE CONF, DRUG TESTING         4876         Purchases           \$36,434.55         An Charles         An C	5/12/2021 1.8900.6420	Legal Fees- HR		SUMMA & RYAN PC	TELE CONF. WITH HR/FMLA	4772	Purchases	EEO & FMLA questions
	9/12/2021 1.8900.6420	Legal Fees- HR		SUMMA & RYAN PC		4876	Purchases	Drug testing question
			\$36,434.55		AND			
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		0.000-0	DETAILED LEGAL FEES SCHEDULE	DULE		CARL THE PROPERTY OF THE PROPE
	THE PROPERTY OF THE PROPERTY O		FISCAL 2021			TOROGRADA.
	-				AND THE PROPERTY OF THE PROPER	AN THE PROPERTY AND THE
TRX Date Account Number	Account De Description Am	Debit Amount Vendor Name	Reference	Orig Doc#	Description	Comments &/or Disposition
Subtotals By Vendor:		THE RESERVE THE PROPERTY OF TH	Legal Fees Disallowances:		T POPONE THE THE TANK	
Allied World Insurance Co.	(\$29,385.00)	THE PART OF THE PA	Garrison, Levin-Epstein	D & O Litigation	\$35.010.02	AND
Finn Divon & Harling	00000		Less: Reimbursement from Allied World Insurance of Garrison, Levin-Epstein			
יייין איייין	7998.38		legal fees re D & O litigation.	D & O Litigation	(\$29,385.00)	TREADY OF THE PROPERTY OF THE
Garrison, Levin-Epstein	\$35,010.02	The state of the s	Murtha Cullina LLP	Collection Matters	\$9,337.68	
				Real Estate Matter- Should Not Have Been		
Jackson Lewis PC	\$14,579.13		Robinson & Cole LLP	Paid	\$1,546.50	
				Employee Discrimination		PROVIDENCE OF THE PROPERTY OF
011 coilling cht.	4			Suit Settled-50%		
ואוסו הום כמוווון דרג	53,031.18	British district and the second secon	Jackson Lewis PC	Disallow	\$7,289.57	
		THE STATE OF THE S		Employee Discrimination		WAY AND THE RESERVE THE RESERV
Robinson & Cole LLP	\$3,732.25	-	Elzbieta Thomas (Settlement-Empl)	Suit Settled-50% Disallow	\$2 546 32	
				Employee Discrimination		TOTAL
	1			Suit Settled-50%		
Summa & Kyan PC	\$5,037.30		Sabatini And Associates, LLC	Disallow	\$3,657.36	
Purcell, Flanagan, Hay & Greene, P.A.	\$5 005 76			Indep. Living Related-	4	
Sabatini And Associates 110	CT 214 C		ruicen, rianagan, nay & Greene, P.A.	Disallow 100%	\$6,005.76	THE PARTY OF THE P
משמשנווו אוום אפטטרומובט, בבר	2/,314.72		PROBLEM AND ADMINISTRATION OF THE PROPERTY OF		\$36,008.21	
Eizbieta Ihomas (Settlement-Empl)	\$5,092.64	The state and a state of the st				TOTAL CONTROL OF THE PROPERTY
TOTAL	\$57,926.98				NAME OF TAXABLE PARTY O	AND THE PROPERTY OF THE PROPER
		TOTAL VISION IN THE STATE OF TH		The same and the s	THE PERSON NAMED IN COLUMN TWO IS NOT THE PERSON NAMED IN COLUMN TWO IS NAMED IN COL	TOTAL TOTAL CONTROL OF THE PARTY OF THE PART

State of Connecticut
Annual Report of Long-Term Care Facility
CSP-8 Rev. 9/2002

## Schedule of Resident Statistics

Name of Facility			License No.	4o.			Report fo	Report for Year Ended	þ		Page	Jo
Elim Park Baptist Home, Inc.			6	9999			9/30/202	,			) ∞	37
						Period 10/1 Thru 6/30	'1 Thru 6/	30		Period 7/1	1 Thru 9/30	30
		Total	Total	Total								
	Total All   Levels	CCNH	RHNS	Residential Care Home	Total	CONH	SHMS	Residential	Total	CCNIL	DHING	Residential
1. Certified Bed Capacity							Chilini	Care House	1 Otal	CCIAL	CNILIN	Care nome
A. On last day of PREVIOUS report period	132	06		42	132	06		42				
B. On last day of THIS report period	132	06		42					132	06		42
2. Number of Residents												2
A. As of midnight of PREVIOUS report period	115	74		41	115	74		41				
B. As of midnight of THIS report period	107	73		34					107	73		3.4
3. Total Number of Days Care Provided During Period										2		+0
A. Medicare	5,003	5,003			3,961	3,961			1.042	1.042		
B. Medicaid (Conn.)	12,802	12,802			9,326	9,326			3,476	3.476		
C. Medicaid (other states)												
D. Private Pay	3,684	3,228		456	2,606	2,364		242	1.078	864		214
E. State SSI for RCH	12,857			12,857	9,939			9,939	2.918			2 918
F. Other (Specify) Managed Care; Hospice	3,855	3,855			2,919	2,919			936	936		î
G. Total Care Days During Period (3A thru F)	38,201	24,888		13,313	28,751	18,570		10.181	9.450	6 318		3 132
Total Number of Days Not Included in Figures in 3G 4. for Which Revenue Was Received for Reserved												
									******			
A. Medicaid Bed Reserve Days												
B. Other Bed Reserve Days												
5. Total Resident Days (3G + 4A + 4B)	38,201	24,888		13,313	28,751	18,570		10,181	9,450	6,318		3.132
												- 2 - 6

Schedule of Resident Statistics (Cont'd)

Name of Faci	lity			Lice	ise No.				Repor	t for Year	Ended		Page	of
Elim Park Baj	ptist Ho	me, Inc.			666c					9/30/202	:1		9	37
4 337		1		1							× 7			
			in the certified belowing informa		pacity du	ring ti	he repo	ort yea	r?	O	Yes	•	No	
11 115	· · · · · · · · · · · · · · · · · · ·		f Change	tion.	Ck	ango	in Bed	6	····	Co	nacity A fe	ter Change	T	
		i lace o	Residential		Ci	lange	III Ded	.5	····	Ca	pacity An	ler Change	1	
Date of	CCNH	RHNS			Lost		,	Gaine	d					
Change												Residential		
Change	(1)	(2)	(3)	(1)	(2)	(3)	(1)	(2)	(3)	CCNH	RHNS	Care Home	Reason 1	or Change
			***************************************					-					ļ	
								$\vdash$						
				ii				ii		L			1	
			in certified bed			the re	eport y	ear (as	report	ted in item	4 above)	provide the nu	mber of	
RESIDE	NT DA	YS for	90 days followir	ig the	change.					·		·	·	
			<i>~</i> ! ! <i>~</i>											
1st chang			Change in Re	esiden	t Days					CC	NH	RHNS	Residentia	Care Home
2nd chan		···········							······································					
3rd chan									***************************************					
4th chang	ge													
6. Number	of Resic	lents an	d Rates on Septe	mber			ar						4	
			Medicare		Medio	caid				Se	lf-Pay	-	Other Sta	te Assisted
								Ī						
	<b>.</b>		~~	_								Residential		
No. of Re	Item		CCNH	C	CNH	RF	INS	CC	CNH	RH	INS	Care Home	R.C.H.	ICF-MR
Per Diem			11		31				31			3	31	
a. One b			Various PPS		309.95				580.00			195.00	148.41	
b. Two b			Various PPS		309.95				550.00			170.00	148,41	
c. Three	or more	;												
bed ri	ns.													
7 Total No.	l- au af	Dlancia	.l Theorem Toronto							TO	D 4 T	000,111	nunic	Residential
	mber of Medica	-	ıl Therapy Treati	nents						10	ΓAL 6.673	CCNH	RHNS	Care Home
			usive of Part B)		······································			***************************************			0,073	6,673		
		,	e Treatments											
	2. Rest	orative '	Treatments											
	Other										22,708	22,708		
			Therapy Treatm					·			29,381	29,381		
	mber of Medica		Therapy Treatm	ents							215	21.5		
			usive of Part B)	~~~~~~							215	215		
			Treatments											
			Treatments									***************************************		
	Other		4.44								1,424	1,424		
			herapy Treatme								1,639	1,639		
			tional Therapy T	reatn	nents									
	Medicai Medicai		usive of Part B)								1,950	1,950		
			Treatments											
			Treatments											
C. •	Other										22,275	22,275		
D.	Total O	ccupati	onal Therapy Ti	eatm	ents						24,225	24,225		

### **Annual Report of Long-Term Care Facility**

CSP-10 Rev. 9/2002

Report of Expenditures - Salaries & Wages

Name of Facility		Darati	T		T .	
·	License No.		Report for Yea	r Ended	Page	of
Elim Park Baptist Home, Inc.	666c		9/30/2021		10	37
Are time records maintained by all individuals receiving cor	npensation?	0	Yes	0	No	
			Total Cost a	nd Hours	*	
					Residential	
Item	CCNH	Hours	RHNS	Hours	Care Home	Hours
A. Salaries and Wages*						
Operators/Owners (Complete also Sec. I     of Schedule A1)	155 476	1.070				
2. Administrator(s) (Complete also Sec. III	155,478	1,270			83,167	680
of Schedule A1)	98.181	1,270			52,519	680
3. Assistant Administrator (Complete also Sec. IV	70,101	1,270			32,319	000
of Schedule A1)						
4. Other Administrative Salaries (telephone						
operator, clerks, receptionists, etc.)	489,538	15,811			326,651	9,95
5. Dietary Service						
a. Head Dietitian						
b. Food Service Supervisor	255.050	15.060			104.104	
c. Dietary Workers 6. Housekeeping Service	255,059	15,968			136,436	8,542
a. Head Housekeeper	12,318	407			5,393	178
b. Other Housekeeping Workers	174,955				76,605	4,723
7. Repairs & Maintenance Services					10,002	,,,-
a. Engineer or Chief of Maintenance	21,709	4		eroca enveronmental antique	9,505	208
b. Other Maintenance Workers	63,552	2,824			27,826	1,237
8. Laundry Service	10.00	700				
a. Supervisor b. Other Laundry Workers	18,665 22,012	509 1,711			9,963	271 913
Sarber and Beautician Services	22,012	1,/11			11,748	913
10. Protective Services						
11. Accounting Services						
a. Head Accountant	39,671	635			21,221	340
b. Other Accountants	133,974	4,673			71,665	2,500
12. Professional Care of Residents					100	
a. Directors and Assistant Director of Nurses     b. RN	113,201	1,583			15,034	210
1. Direct Care	1,139,652	24,664				
2. Administrative**	503,106	9,184			1,723	379
c. LPN	202,100	2,101			1,723	379
Direct Care	613,658	18,268			80,287	2,571
2. Administrative**						
d. Aides and Attendants	1,339,303	66,010			262,989	11,897
e. Physical Therapists f. Speech Therapists	470,175	12,234				
g. Occupational Therapists	72,871 407,764	1,278 11,005				
h. Recreation Workers	97,093	5,211			51,937	2,788
i. Physicians	37,035	5,211			31,937	2,700
Medical Director						
Utilization Review						
3. Resident Care***						
4. Other (Specify)						
j. Dentists						
k. Pharmacists						
Podiatrists						
m. Social Workers/Case Management	69,963	2,142			37,425	1,146
n. Marketing	5,743	132			3,072	70
o. Other (Specify)						
See Attached Schedule	2,096	90			1,122	48
A-13. Total Salary Expenditures	6,319,737	208,138			1,286,288	49,332

<sup>\*</sup> Do not include in this section any expenditures paid to persons who receive a fee for services rendered or who are paid on a contract basis.

<sup>\*\*</sup> Administrative - costs and hours associated with the following positions: MDS Coordinator, Inservice Training Coordinator and Infection Control Nurse. Such costs shall be included in the direct care category for the purposes of rate setting.

<sup>\*\*\*</sup> This item is not reimbursable to facility. For Title 19 residents, doctors should bill DSS directly. Also, any costs for Title 18 and/or other private pay residents must be removed on Page 28.

### Schedule of Other Salaries and Wages (Page 10)

	CC	NH	RH	NS	I	Residential	Care Home
Position	S	Hours	S	Hours		S	Hours
Wages- Director- Christian Ministries - disallowed p 28 (Attachme	\$ 517	40	\$ -	-	\$	277	21
Wages - Director- Volunteer	\$ 1,579	50			\$	845	27
Total	\$ 2,096	90	\$ -	-	\$	1,122	48

### Schedule of Other Fees (Page 13)

	 CCI	NH	 RH	NS	R	esidential (	Care Home
Service	<u> </u>	Hours	S	Hours		S	Hours
Purchased Services - Respiratory Assessments Nsg	\$ 263	5			\$	-	
Purchased Services - Management-Therapy (See Detail Attac	\$ 111,349	1,260					
Purchased Services- Christian Ministries	\$ 474	4			\$	253	2
			 	·	<u> </u>		
					-		
Total	\$ 112,086	1,269	\$ -	-	\$	253	2

\_\_\_\_\_

Medicaid Provider #6668 & 1500H					Attacl	Attachment Page 10a
S. S				1500H		
9,219 9,219 3,303 3,303			·YE 9/30/2021			
9,219 9,219 3,303 3,303	Attachm	ent To Page 10a	re Schedule Of	Other Fees (Page	13)	
9,219 9,219 3,303 3,303		October 1, 2020	Through Septen	ıber 30, 2021		
9,219 8,827 3,303 ,349		TOTAL PURCH. SERVICES- THERAPY COST	TOTAL PURCH. SERVICES- THERAPY HOURS	ALLOCATION FACTOR	ALLOCATED PURCH. SERVICES- THERAPY COST	ALLOCATED PURCH. SERVICES. THERAPY HOURS
8,827 3,303 ,349	Portion Of "Purchased Services-Therapy" Costs & Hours Allocated To Physical Therapy	\$111,349	1,260	x 29,381 / 55,245 =	\$59,219	029
3,303 , <b>349</b>	Portion Of "Purchased Services-Therapy" Costs & Hours Allocated To Occupational Therapy	\$111,349	1,260	× 24,225 / 55,245 =	\$48,827	553
,349	Portion Of "Purchased Services-Therapy" Costs & Hours Allocated To Speech Therapy	\$111,349	1,260	× 1,639 / 55,245 =	\$3,303	And and the second seco
NOTE: Allocation factors above are based on percentage of respective Physical Therapy units, Occupational Therapy units to Total Therapy Units.	TOTAL				\$111,349	1,260
	NOTE: Allocation factors above are based on pe Speech Therapy units to Total Therapy Units.	ercentage of respection	ve Physical Therapy	units, Occupational Th	erapy units, or	

State of Connecticut Annual Report of Long-Term Care Facility CSP-11 Rev. 10/2005

# Schedule A1 - Salary Information for Operators/Owners; Administrators,

Assistant Administrators and Other Related Parties\*

Name of Facility				- 1 -	icense No	Penort for	Deport for Veer Ended			S.
				Licelise 140.		lochou lot	rear Ended		rage	ot
Elim Park Baptist Home, Inc.				9999 9		9/30/2021			_	37
		Salary Paid	q							
			Residential	Fringe Benefits and/or Other Pavments	Full Description of	Total	Line Where	Name and Address of All	Total	
Name	CCNH	RHNS	Care Home	(describe fully)	Services Rendered	Worked	Page 10	Other Employment**	Worked	Compensation
Section I - Operators/Owners										
Brian Bedard	93,104		49,802	Non-discrim. except for life 49,802 insurance	Asst. Administrator - Management of facility	975	A4	Elim Park Place, 150 Cook Hill Road, Cheshire, CT	975	145 208
Zell Gaston	62,374		33,365	Non-discrim. except for life 33,365 insurance	Chief Financial Officer	975		Elim Park Place, 150 Cook Hill Road, Cheshire, CT	376	96,613
Section II - Other related parties of Operators/Owners employed in and paid by facility (EXCEPT those who may be the Administrator or Assistant Administrators who are identified on Page 12).										

<sup>\*</sup> No allowance for salaries will be considered unless full information is provided. Use additional sheets if required.

<sup>\*\*</sup> Include all employment worked during the cost year.

State of Connecticut

## Annual Report of Long-Term Care Facility

CSP-12 Rev. 10/2005

# Schedule A1 - Salary Information for Operators/Owners; Administrators,

Assistant Administrators and Other Related Parties\*

Name of Facility (as licensed)				I icense No		Renort for Veer Ended	ear Ended		Dece	J
				. October		i ioi iiodavi	cal Ellucu		rage	IO
Elim Park Baptist Home, Inc.				9999 9		9/30/2021			12	37
		Salary Paid	-51							
				Fringe Benefits and/or Other		Total	Line Where		Total	
Name	CCNH	RHNS	Residential Care Home	Payments (describe fully)	Full Description of Services Rendered	Hours Worked		Name and Address of All Other Employment**	Hours	Compensation Received
Section III - Administrators***							)			
				im. Iife	Administrator - Management of					
John Sweeney	98,181		52,519	52,519 insurance	facility	1,950 A2	A2			
Section IV - Assistant Administrators										

<sup>\*</sup>No allowance for salaries will be considered unless full information is provided. Use additional sheets if required.

<sup>\*\*</sup> Include all other employment worked during the cost year.

<sup>\*\*\*</sup> If more than one Administrator is reported, include dates of employment for each.

### **Annual Report of Long-Term Care Facility**

CSP-13 Rev. 9/2002

B. Report of Expenditures - Professional Fees

B. Report of E						
Name of Facility	License No.		Report for Y	ear Ended	Page	of
Elim Park Baptist Home, Inc.	<u> </u>	6c	9/30/2021		13	37
		T	Total Cost	and Hours	T	
					Residential	
Item	CCNH	Hours	RHNS	Hours	Care Home	Hours
*B. Direct care consultants paid on a fee	CCIVII	Tiours	KHIVS	Hours	Care Home	Hours
for service basis in lieu of salary						
(For all such services complete Schedule B1)						
1. Dietitian						
2. Dentist	4,707	440				
3. Pharmacist	13,126	215				
4. Podiatrist						
5. Physical Therapy						
a. Resident Care	263	4				
b. Other						
6. Social Worker						
7. Recreation Worker	404	4			216	2
8. Physicians						
a. Medical Director (entire facility)	41,250	104				and the second of the second
b. Utilization Review				70.100		
(Title 18 and 19 only) monthly meeting						
c. Resident Care**						
d. Administrative Services facility						
Infection Control Committee (Quarterly meetings)						
2. Pharmaceutical Committee						
(Quarterly meetings)						
3. Staff Development Committee						
(Once annually)						
e. Other (Specify)				ar en		
9. Speech Therapist						
a. Resident Care						
b. Other						
10. Occupational Therapist						
a. Resident Care						
b. Other				****		
11. Nurses and aides and attendants						
a. RN						
Direct Care	237,507	2,651				
2. Administrative***						
b. LPN						
1. Direct Care	153,172	3,096				A TOTAL PROPERTY CONTRACTOR AND PROPERTY OF THE PROPERTY OF TH
2. Administrative***						
c. Aides	24,808	888				
d. Other						
12. Other (Specify)						
See Attached Schedule	112,086	1,269			253	2
B-13 Total Fees Paid in Lieu of Salaries	587,323	8,671			469	4

<sup>\*</sup> Do not include in this section management consultants or services which must be reported on Page 16 item M-12 and supported by required information, Page 17.

<sup>\*\*</sup> This item is not reimbursable to facility. For Title 19 residents, doctors should bill DSS directly. Also, any costs for Title 18 and/or other private pay residents must be removed on Page 28.

<sup>\*\*\*</sup> Administrative - costs and hours associated with the following positions: MDS Coordinator, Inservice Training Coordinator and Infection Control Nurse. Such costs shall be included in the direct care category for the purposes of rate setting.

### Schedule of Other Salaries and Wages (Page 10)

	<b></b>	CC	NH	 RH	INS	I	Residential (	Care Home
Position		\$	Hours	\$	Hours		S	Hours
Wages- Director- Christian Ministries - disallowed p 28 (Attachm	\$	517	40	\$ -	-	\$	277	21
Wages - Director- Volunteer	\$	1,579	50			\$	845	27
		***************************************						
		·····						
Total	\$	2,096	90	\$ -	-	\$	1,122	48

### Schedule of Other Fees (Page 13)

		CCI	NH		RH	NS	R	esidential (	Care Home
Service		\$	Hours		S	Hours		S	Hours
Purchased Services - Respiratory Assessments Nsg	\$	263	5				\$	-	
Purchased Services - Management-Therapy (See Detail Attac	\$	111,349	1,260						
Purchased Services- Christian Ministries	\$	474	4				\$	253	2
	ļ		<u> </u>	ļ			-		
Total	\$	112,086	1,269	\$		-	\$	253	2

### Report of Expenditures Schedule B1 - Information Required for Individual(s) Paid on Fee for Service Basis\*

Name of Facility Elim Park Baptist Home, Inc.	License No.		Report for Y	ear Ended	Page	of
	666c		9/30/2021 * to Owners,		14	37
Name & Address of Individual	Full Explanation of Service	Operato Yes	ors, Officers No	Expla	nation of Rel	ationship
MARTHA A KURILEC	Dentist	0	0			
TIFFANY TRAN	Pharmacy Consultant	0	0			
ADEDAYO O ADETOLA	Medical Director	0	0			
MARK KAPLAN	Recreation - Music Program	0	0			
DAVID BUGNACKI	Recreation - Music Program	0	0			
RAYMOND BUGNACKI	Recreation - Music Program	0	· •			
RICHARD A DAGENAIS	Recreation - Music Program	0	· ·			
LARRY BATTER	Recreation - Music Program	0	·			
ANGELO FRANCO	Recreation - Music Program	0	0			
ACCESS CAPITAL INC	Agency Nurses and Aides	0	·			
COMPLETE STAFFING SOLUTIONS	Agency Nurses and Aides	0	0			
KEY PERSONNEL	Agency Nurses and Aides	0	0			
VICTOR ARDUINI	Agency Nurses and Aides	0	0			
JOAN RADOCCHIO	Agency Nurses and Aides	0	0			
		0	0			
		0	0			
		0	0			
		0	0			
		0	0			
		0	0			
		0	0			
		0	•			

<sup>\*</sup> Use additional sheets if necessary.

<sup>\*\*</sup> Refer to Page 4 for definition of related.

### C. Expenditures Other Than Salaries - Administrative and General

	ise No.	Report for Y	ear Ended	Page	of
Elim Park Baptist Home, Inc.	666c	9/30/2021		15	37
					Residential
Item		Total	CCNH	RHNS	Care Home
1. Administrative and General					
a. Employee Health & Welfare Benefits					
1. Workmen's Compensation	9	217,429	180,659		36,770
2. Disability Insurance	9	S			
3. Unemployment Insurance	9	14,092	11,709		2,383
4. Social Security (F.I.C.A.)	9	534,160	443,826		90,334
5. Health Insurance	9	672,728	558,960		113,768
6. Life Insurance (employees only)					
(not-owners and not-operators)	9	14,356	11,928		2,428
7. Pensions (Non-Discriminatory)	9	232,880	193,497		39,383
(not-owners and not-operators)					
8. Uniform Allowance	9	9,773	8,120		1,653
9. Other ( <i>Specify</i> )	9	S			
See Attached Schedule					
b. Personal Retirement Plans, Pensions, and	\$				
Profit Sharing Plans for Owners and		100			
Operators (Discriminatory)*			100		
c. Bad Debts*	\$	201,292	177,580		23,712
d. Accounting and Auditing	\$	60,032	39,111		20,921
e. Legal (Services should be fully described on Pa	ge 7) \$	57,927	37,740		20,187
f. Insurance on Lives of Owners and	\$				
Operators (Specify)*			100		
g. Office Supplies	\$	31,182	20,315		10,867
h. Telephone and Cellular Phones					,
1. Telephone & Pagers	\$	28,565	18,610		9,955
2. Cellular Phones	\$	· ·	6,314		3,378
i. Appraisal (Specify purpose and	\$				
attach copy)*					
j. Corporation Business Taxes (franchise tax)	\$				
k. Other Taxes (Not related to property - See Page					
1. Income*	\$				
2. Other (Specify)	\$				
See Attached Schedule					
3. Resident Day User Fee	\$				
Subtotal	\$	ļ	1,708,369		375,739

<sup>\*</sup> Facility should self-disallow the expense on Page 28 of the Cost Report.

Attachment Page 15

### **Schedule of Other Employee Benefits**

Description	CCNH	RHNS	Residential Care Home
	\$ -	\$ -	\$ -
Total	\$ -		\$ -

\_\_\_\_\_\_

### **Schedule of Other Taxes**

					Resi	dential
Description	C	CNH	R	HNS	Care	Home
	\$	-	\$	205	\$	
Total	\$	-	\$		\$	

### C. Expenditures Other Than Salaries (cont'd) - Administrative and General

Name of Facility	License No.		Report for	Year Ended	Page	of
Elim Park Baptist Home, Inc.	666c		9/30/2021		16	37
						Residential
Item			Total	CCNH	RHNS	Care Home
	ls Brought Forwa	ırd:	2,084,108	1,708,369		375,739
l. Travel and Entertainment				100		
Resident Travel and Entertainment		\$	28	18		10
2. Holiday Parties for Staff		\$				
3. Gifts to Staff and Residents		\$	29,522	19,234		10,288
4. Employee Travel		\$				
5. Education Expenses Related to Seminars an		\$	14,951	9,741		5,210
6. Automobile Expense (not purchase or depr	eciation)	\$	1,730	1,127		603
7. Other ( <i>Specify</i> )		\$				
See Attached Schedule				100		
m. Other Administrative and General Expenses						
1. Advertising Help Wanted (all such expenses	s )	\$	53,580	34,907		18,673
2. Advertising Telephone Directory (all such e	xpenses )***	\$				
3. Advertising Other (Specify)***		\$	58,951	38,407		20,544
See Attached Schedule						
4. Fund-Raising***		\$				
5. Medical Records		\$				
6. Barber and Beauty Supplies (if this service i	s supplied	\$				
directly and not by contract or fee for service	e)***					
7. Postage		\$	3,118	2,031		1,087
* 8. Dues and Membership Fees to Professional		\$	18,159	11,831		6,328
Associations (Specify)						
See Attached Schedule						
8a. Dues to Chamber of Commerce & Other Non-A	llowable Org.***	\$	589	384		205
9. Subscriptions		\$	1,244	810		434
10. Contributions***		\$	253,225	164,976		88,249
See Attached Schedule						
11. Services Provided by Contract (Specify and	Complete	\$	116,361	75,810	Control of the Contro	40,551
Schedule C-2, Page 21 for each firm or indi						
12. Administrative Management Services**		\$				
13. Other (Specify)		\$	352,248	229,000		123,248
See Attached Schedule						
C-14 Total Administrative & General Expenditures		\$	2,987,814	2,296,645		691,169

<sup>\*</sup> Do not include Subscriptions, which should go in item 9.

<sup>\*\*</sup> Schedule C-1, Page 17 must be fully completed or this expenditure will not be allowed.

<sup>\*\*\*</sup> Facility should self-disallow the expense on Page 28 of the Cost Report.

### Schedule of Other Travel and Entertainment

Description		CNH	Residential Care Home		
	\$	_	\$ **	\$	-
Total Other Travel and Entertainment	\$	_	\$ -	\$	-

Schedule of Other Advertising

						sidential
Description		CCNH	RHNS		Care Home	
Marketing - Advertising Other/Public Relations - disallowed on p. 28	\$	20,086	\$	-	\$	10,744
Marketing - Admissions Expense (Non-Wages)- disallowed on p. 28	\$	18,321			\$	9,800
Total Other Advertising	\$	38,407	\$		\$	20,544

Schedule of Dues

					Res	idential
Description		CCNH	RHNS		Care Home	
AICPA - disallowed p. 28 (Attachment)	\$	204	\$	-	\$	109
CAHCF	\$	4,230			\$	2,262
CTCPA - disallowed p. 28 (Attachment)	\$	91			\$	48
Leading Age	\$	6,720			\$	3,595
American Healthcare Association	\$	586			\$	314
Total Dues	\$	11,831	\$	-	\$	6,328

**Schedule of Contributions** 

					Re	sidential	
Description		CCNH		RHNS		Care Home	
Cheshire, CT Police & Fire Department Donations	\$	127,042	\$	-	\$	67,958	
Donation to Mary Melby Fund	\$	29,317			\$	15,683	
Donation to Employee Emergency Fund	\$	4,170			\$	2,230	
Donation to Employee Scholarships	\$	4,170			\$	2,230	
Chartible Contributions to (2) employees	\$	277			\$	148	
Total Contributions	\$	164,976	\$	_	\$	88,249	

-----

### Schedule of Other Administrative and General

Description		CCNH	г	RHNS		esidential ire Home
Purchased Services Nursing Admin - OnShift Scheduling Software	\$	5,160	<u> </u>	MINS	\( \frac{C_2}{\\$}	
Employee Physicals & Other - Pre Placement Physicals (disallowed on p. 2	<del> </del>	2,139			\$	2,760
Volunteer Recognition - disallowed p. 28 (Attachment)	\$	2,139			\$	1,144
Professional Fees	\$	34,376			\$	
Licenses	\$	34,370			\$	18,388 967
Miscellaneous - Finance (disallowed on p. 28)	\$	1,041			\$	557
Bank & Credit Card Fees - payment processing, check orders, stop payme	<del></del>	· · · · · · · · · · · · · · · · · · ·				
Miscellaneous - Administration (Disallow)	\$	33,857			\$	18,110
Miscellaneous - IT (disallowed on p. 28)	\$	43,479			\$	23,258
Alliance-CALTC - disallowed p. 28 (Attachment)		5			\$	2 2 40
Insurance Directors & Officers	\$	652			\$	348
	\$	18,439			\$	9,864
Other - Nursing	\$	2,876			\$	1,539
Purchased Services - Admissions - disallowed p. 28 (Attachment)	\$	6,666		<del></del>	\$	3,565
Telephone (Internet Services)	\$	6,802			\$	3,639
Other - Admissions - Reptrax & Vendormate - disallowed p. 28 (Attachme		476			\$	254
Discounts Taken	\$	(1,452)		***************************************	\$	(777)
Purchased Services - Administration	\$	11,407			\$	6,102
Purchased Services - Finance	\$	39,616			\$	21,192
Purchased Services - Volunteer	\$	-	~~~		\$	-
Purchased Services - IT	\$	2,423			\$	1,296
Purchased Services - HR	\$	8,551			\$	4,574
Employee Background Check	\$	9,995			\$	5,346
Miscellaneous - HR - disallowed p. 28 (Attachment)	\$	1,977			\$	1,057
Total Other Administrative and General	\$	229,000	\$	N+-	\$	123,248

# **Schedule C-1 - Management Services\***

Name of Facility Elim Park Baptist Home, Inc.	License No. 666c	Report for Year Ended 9/30/2021	Page of
Limit ark Daptist Home, Inc.		9/30/2021	17   37
Name & Address of Individual or Company Supplying Service	Cost of Management Service	Full Description of Mgmt. Service Provided	Indicate Where Costs are Included in Annual Report Page #/Line #
Sodexo, P.O. Box 360170, Pittsburgh, PA 15251-6170	213,785	Dietary Staff Management, Support, Training, Food Purchase, Quality Assurance, Quantity Discount	Page 18, Line 2b
HealthPRO Management Services, Spectrum Acquisitions, LLC SNF PO Box 69268 Baltimore, MD 212649268	111,349	Therapy Staff Management, Support, Training & Other Therapy Administrative Functions	Page 13, Line B. 12

<sup>\*</sup> In addition to management fees reported on page 16, line m12 include any additional management company charges or allocations of home office overhead costs reported elsewhere in the Annual Report.

# C. Expenditures Other Than Salaries (cont'd) - Dietary Basis for Allocation of Costs (See Note on Page 5)

Nan	ne of Facility		Licens	a No	Day	- a - t - fa - 1 V	C11	I Dana	- C
1	ne of Facility  1 Park Baptist Home, Inc.	- [	Licens		-		ear Ended	Page	of
Liii	rark Dapust Home, mc.			666c	+	0/30/2021	T	18	37
	I4			T . 1	1.	COM	DIDIG	1	ntial Care
2.	ltem Dietary			Total	(	CCNH	RHNS	H	ome
2.	•								
	<ul><li>a. In-House Preparation &amp; Service</li><li>1. Raw Food</li></ul>		d	242.252		157.000			04.405
			9	<del></del>		157,828			84,425
			9	·		19,458		ļ	10,409
	1 00/	_	9	3,713		2,419			1,294
	Dietary Services To Departments								
	h Doubles d'Ossière (1			010 707					
	b. Purchased Services (by contract other		9	213,785		139,281			74,504
	than through Management Services)								
ļ	(Complete Schedule C-2 att. Page 21)			06 101		1=010			
	c. Other (Specify)		9	26,121		17,018			9,103
	0								
2D	Support Fees  Total Dietary Expenditures (2a + b + c + d)			515 530		224.004			
20.	Total Dielary Experimetres (2a+0+c+a)		9	515,739	<u> </u>	336,004			179,735
								Reside	ntial Care
2E.	Dietary Questionnaire			Total		CCNH	RHNS	H	ome
F.	Resident Meals: Total no. of meals served per d	łay:	*	314		205			109
G.	Is cost of employee meals included in 2D?	' C	Yes	•	No				
H.	Did you receive revenue from employees?	) Y	Yes	•	No		If yes, specify amt.		
I.	Where is the revenue received reported in the C	ost	Repor	t? (Page/Line	Item	)			
	Is cost of meals provided to persons other						10 :0		
J.	than employees or residents (i.e., Board	) Y	Yes	•	No		If yes, specify		
	Members, Guests) included in 2D?						cost.		
17	1 . 10 . 10		-				If yes, specify	***************************************	
K.	Is any revenue collected from these people?	וע	Y es	•	No		amt.		
L.	Where is the revenue received reported in the C	ost	Repor	t? (Page/Line	Item	)		P 30 IV1	
	Is cost of food (other than meals, e.g.,								
	snacks at monthly staff meetings, board	S =	7	^			If yes, specify		
M.	meetings) provided to employees included	) Y	es es	O	No		cost.		
	in 2D?								\$2,462
			_	_		***************************************	If yes, specify		. ,
N.	Is any revenue collected from employees?	) }	es es	•	No		amt.		
0.	Where is the revenue received reported in the C	ost	Repor	t? (Page/Line	Item`	`			
<u> </u>		- J.J.L	· copor	· (rugo/L/me	1.0111	,			

<sup>\*</sup> Count each tray served to a resident at meal time, but do not count liquids or other "between meal" snacks.

# C. Expenditures Other Than Salaries (cont'd) - Laundry Basis for Allocation of Costs (See Note on Page 5)

Name of		License		Report for Y	Year Ended	Page	of
Elim Pai	k Baptist Home, Inc.		666c	9/30/2021		19	37
							ential Care
	Item	·	Total	CCNH	RHNS	<u> </u>	lome
	indry						
1	In-House Processing*	Lbs.	4,680	3,051			1,629
	1. Bed linens, cubicle curtains, draperies,	A					
	gowns and other resident care items washed, ironed, and/or processed.***	Amt. \$					
,	2. Employee items including uniforms,	Lbs.					
	gowns, etc. washed, ironed and/or	Los.					
	processed.***						
	processed.	Amt. \$					
	3. Personal clothing of residents	Lbs.					
	washed, ironed, and/or processed.***	Amt. \$					
4	4. Repair and/or purchase of linens.***	Lbs.					
		Amt. \$	726	473			253
b. 1	Purchased Services (by contract other	\$	60,512	39,454			21,058
1	han through Management Services)		,	,			21,000
	Complete Schedule C-2 att. Page 21)						
c. (	Other (Specify)	\$	10,769	7,021			3,748
	Chemicals, Misc. Supplies						
3D. Total	al Laundry Expenditures (3a + b + c)	\$	72,007	46,948			25,059
3E. Lau	ndry Questionnaire						
F. Is c	ost of employee laundry included in 3D? O	Yes	•	No	If yes, specify cost.		
G. Did	you receive revenue from employees?	Yes	0	No	If yes, specify amt.		***************************************
H. Wh	ere is the revenue received reported in the Cost	Report?		(Page/Line			
Is C	ost of laundry provided to persons other				If yes,		
I. than	employees or residents included in 3D?	Yes	•	NIO	specify cost.		
J. Did	you receive revenue from these people? O	Yes	•	NIA	If yes, specify amt.		
K. Who	ere is the revenue received reported in the Cost	Report?		(Page/Line	Item)		

<sup>\*</sup> Do not include salaries from page 10 as part of dollar values recorded in 1, 2, 3, and 4. All allocations should add to total recorded in 3D.

<sup>\*\*\*</sup> Pounds of Laundry only required for multi-level facilities.

# C. Expenditures Other Than Salaries (cont'd) - Housekeeping and Resident Care Basis for Allocation of Costs (See Note on Page 5)

Name of Facility	License No.	Rep	ort for Year E	Ended	Page	of
Elim Park Baptist Home, Inc.	666c		9/30/2021		20	37
Item			Total	CCNH	RHNS	Residential Care Home
4. Housekeeping	Sq. Ft. Serviced		49,191	34,706		14,485
a. In-House Care	by Personnel		,	2 1,1 0 0		.,,,,,,,
1. Supplies - Cleaning ( <i>Mops</i> ,	Amt.	\$	32,194	22,390		9,804
pails, brooms, etc.)			ŕ	,		,,,,,,,
b. Purchased Services (by contract other	Sq. Ft. Serviced					
than through Management Services)	by Personnel					
(Complete Schedule C-2 att.	Amt.	\$				
Page 21)						
C. Other ( <i>Specify</i> )		\$	5,488	3,817		1,671
Floor Cleaning, Small Equipment,	Supplies					
4D. Total Housekeeping Expenditures (4a +		\$	37,682	26,207		11,475
5. Resident Care (Supplies)**						
a. Prescription Drugs***						
1. Own Pharmacy		\$				
2. Purchased from		\$	300,058	300,058	***************************************	
PHARMERICA			186.00			
b. Medicine Cabinet Drugs		\$	16,619	16,619		
c. Medical and Therapeutic Supplies		\$	(1.594)	(1,594)		
d. Ambulance/Limousine***		\$	6,756	6,756		
e. Oxygen						
For Emergency Use		\$		2 manual		
2. Other***		\$	18,815	18,815		
f. X-rays and Related Radiological		\$	32,966	32,966		
Procedures***						
g. Dental (Not dentists who should be incl	luded under	\$				
salaries or fees)						
h. Laboratory***		\$	37,438	37,438		
i. Recreation		\$	37,509	24,437		13,072
j. Direct Management Services*		\$				
k. Indirect Management Services*		\$				
Other (Specify)****		\$	224,655	217,690		6,965
See Attached Schedule						
5M. Total Resident Care Expenditures (5a - 5	j)	\$	673,222	653,185		20,037

<sup>\*</sup> Schedule C-1, Page 17 must be fully completed or this expenditure will not be allowed.

<sup>\*\*</sup> Do not include any fees to professional staff, these should be reported on Page 13, or, if paid on salary basis, on Page 10.

<sup>\*\*\*</sup> Facility should self-disallow the expense on Page 29 of the Cost Report.

<sup>\*\*\*\*</sup> ICFMR's should provide a detailed schedule of all Day Program Costs.

### **Schedule of Other Resident Care**

Description	CCNH	R	HNS	 idential e Home
Supplies - Short Term	\$ 81,963			······
Supplies - Short Term - wound vac - disallowed p. 29	\$ 1,743			
Equipment Rental - Short Term - wound vac - disallowed p. 29	\$ 3,553			
Equipment Rental - Short Term - Air Mattresses - disallowed p. 29	\$ 902			*****
Supplies - Long Term	\$ 111,155			
Supplies - RCH - disallowed \$642 p. 29	***************************************		***************************************	\$ 3,680
Supplies (Non-Medical)- Nsg	\$ 684			\$ 386
Small Equipment Purchased- Nsg	\$ 5,351			\$ 2,862
Purchased Services - Therapy - disallowed p. 29	\$ 5,040			
Supplies- Therapy - disallowed p. 29	\$ 7,221			\$ 
Other - Therapy - disallowed p. 29	\$ 78		***************************************	\$ 37
Total Other Resident Care	\$ 217,690	\$		\$ 6,965

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# Schedule C-2 - Individuals or Firms Providing Services by Contract \* Report of Expenditures

Name of Facility Elim Park Baptist Home, Inc.				License No. 666c	Report for Year Ended 9/30/2021	-			Page 21	of 37
		Related ** to Owners, Operators, Officers	o Owners, Officers			L	otal Cost/	Total Cost/Page Ref.***		
Name of Individual or	V V	>		Explanation of	Full Explanation of			Residential		
Company	Address	res	ON.	Kelationship	Service Provided*	CCNH	KHNS	Care Home	Pg	Line
Sodexo	Pittsburgh, PA 15251- 6170	0	•	None	Dietary Purchased Services	139.281		74 504	~	2h
Whalley Computer Associates	Brattleboro, VT 05302- 1292	0	0	None	Computer Services	20.230		10.821	91	1 m1 9
Kronos Saashr Inc.	PO Box 744724 Atlanta, GA 30374	0	•	None	Payroll Services	9 222		4 933	1 91	1 1 1
Cox Communications	P.O. Box 182656, Columbus, OH 43218	0	0	None	Cable TV	18,628		9.964	20 2i	
Intellitec Solutions LLC	Suite 100, Newark, DE 19713	0	•	None	Computer Services	11,812		6.318	91	16 lm13
Point Click Care	PO Box 674802 Detriot, MI, 48267	0	•	None	Computer Services	29,758		15.918	161	16 lm13
A/R Solutions LLC	P.O. BOX 592 Wallingford, CT 06492	0	•	None	Accounts Receivable Consulting	10,673		5,709	1 91	16 Jm13
Konica Minolta Premier Finance	Philadelphia, PA 19176- 0239	0	0	None	Repair & Maintenance Of Copiers	15,432		8.255	22 6e	_ o
Celtic Consulting LLC	SUITE 308, Torrington, CT 06790	0	0	None	Accounts Receivable Consulting	13,437		7,188	16 Iml3	m 13
Procaire, LLC	P. O. Box 801 Tolland, CT 06084	0	•	None	Oxygen Rental	21.448			20 5 e 2	e 2
NOA Diagnostic Of NY LLC	150 Syosset, NY 11791- 4462	0	0	None	X Ray Services	29,696			20 Sf	<u></u>
Griffin Hospital	130 Division St., Derby, CT 06418	0	0	None	Laboratory Services	34,829			20 5h	T
CWPM, LLC	415, Plainville, CT 06062	0	0	None	Trash Removal	11,794		5,164	22 6a	T
Unitex Textile Rental Service	Parkway Mount Vernon, NY 10550	0	0	None	Laundry Services	54,844		5,668	19 46	<u>م</u>
	4 4 4									1

<sup>\*</sup> List all contracted services over \$10,000. Use additional sheets if necessary.

<sup>\*\*</sup> Refer to Page 4 for definition of related.

\*\*\* Please cross-reference amount to the appropriate page in the Annual Report (Pages 16, 18, 19, 20 or 22).

# C. Expenditures Other Than Salaries (cont'd) - Maintenance and Property

Name of Facility	License No.	Report for Y	ear Ended	W-T	Page of
Elim Park Baptist Home, Inc.	666c	9/30/2021			22   37
					Residential Care
Item		Total	CCNH	RHNS	Home
6. Maintenance & Operation of Plant					
a. Repairs & Maintenance	\$	167,171	116,265		50,906
b. Heat	\$	59,221	46,389		12,832
c. Light & Power	\$	134,435	116,503		17,932
d. Water	\$	56,012	48,769		7,243
e. Equipment Lease (Provide detail on p	age 6) \$	25,525	16,629		8,896
f. Other (itemize)	\$	3,047	2,134		913
See Attached Schedule					
6g. Total Maint. & Operating Expense (6a -	6f) \$	445,411	346,689		98,722
7. Depreciation (complete schedule page 23	*)				
a. Land Improvements	\$	15,920	11,072		4,848
b. Building & Building Improvements	\$	325,327	231,580		93,747
c. Non-Movable Equipment	\$	80,948	56,298		24,650
d. Movable Equipment	\$	144,786	106,614		38,172
*7e. Total Depreciation Costs $(7a + b + c + d)$	) \$	566,981	405,564		161,417
8. Amortization (Complete att. Schedule Paş	ge 24*)				
a. Organization Expense	\$				
b. Mortgage Expense	\$	6,656	4,336		2,320
c. Leasehold Improvements	\$				
d. Other (Specify)	\$				
*8e. Total Amortization Costs $(8a + b + c + d)$	\$	6,656	4,336		2,320
9. Rental payments on leased real property le	ess				
real estate taxes included in item 10b	\$				
10. Property Taxes					
a. Real estate taxes paid by owner	\$				
b. Real estate taxes paid by lessor	\$				
c. Personal property taxes	\$				
11. Total Property Expenses $(7e + 8e + 9 + 1)$	0) \$	573,637	409,900		163,737

<sup>\*</sup> Amounts entered in these items must agree with detail on Schedule for Depreciation and Amortization Page 23 and Page 24.

### Schedule of Other Repairs and Maintenance

Description	CCNH	RHNS	idential e Home
Purchased Services - Grounds- Maint	\$ 2,125		\$ 930
Purchased Services-Grounds-Snowplowing	\$ 182		\$ 79
Equipment Repair & Maintenance- Nsg	\$ 38		\$ 17
Purchased Services-HCC Recreation	\$ (211)		\$ (113)
Total Other Repairs and Maintenance	\$ 2,134	\$ -	\$ 913

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Depreciation Schedule

				מפותפת	Deptectation Senedule	nenne					
Name of Facility				License No.			Report for Year Ended	Inded		Page	of
Elim Park Baptist Home, Inc.				9999	).		9/30/2021			23	37
				Historical			Accumulated	-			
				Exclusive of	Salvage	Cost to Be	Depreciation to Beginning of	Computing	Useful	Depreciation	
Property Item				Land	Value	Depreciated	Year's Operations		Life	for This Year	Totals
A. Land Improvements											
1. Acquired prior to this report period				673,770		673,770	556,964		4-20 yrs	15,920	
2. Disposals (attach schedule)											
3. Acquired during this report period (attach schedule)	th schedule)			3,546							
A-4. Subtotal											15 020
B. Building and Building Improvements											07/750
1. Acquired prior to this report period				13,923,320		13.923.320	11.467.861		5-25 vrs	313 792	
2. Disposals (attach schedule)									216 022 0	27,671	
3. Acquired during this report period (attach schedule)	h schedule)			235,475						11 535	
B-4. Subtotal											225 227
C. Non-Movable Equipment											170,070
				1,465,592		1 465 592	797 706		5.75 vre	000 92	
2. Disposals (attach schedule)						260.6			21,6	((()))	
3. Acquired during this report period (attach schedule)	h schedule)			94.680						3 949	
C-4. Subtotal										7,7,5	80 048
The state of the s											00,740
	Is a mileage logbook		Date of	Historical			Accumulated				***************************************
	maintained?		Acquisition	Cost	Less		Depreciation to	Method of			
	No.		·	Exclusive of	Salvage	Cost to Be	Beginning of		Useful	Depreciation	
D Moroblo Fouriement	- 89	IMOINI	r ear	Land	value	Deprecialed	rear s Operations	Depreciation	Life	for This Year	lotals
a)	Yes	Various V	Various	158,306		158,306	109.966	S/L	4-10 vrs	23.062	
b.							7				
c.											
d.											
2. Movable Equipment											
a. Acquired prior to this report period		Various Various	Various	4,500,038		4,500,038	3,715,048	S/L	3-20 yrs	108,416	
b. Disposals (attach schedule)											
c. Acquired during this report period											
(attach schedule)		dispare		243,779						13,308	
ᡤ											144,786
E. Total Depreciation								1			566,981

### Schedule of Land Improvements Acquired during this report period

				Useful		
Acquisition Date	Description of Item		Cost	Life	Depreciation	a
Additions:						٦
4/28/2021	RCH PATIO RENOVATION PROJECT - PAVER STONES *	\$	3,546	10	s -	٦
	*No depr'n recorded on RCH Patio Renov"Catch-Up Adj in fiscal 2	2022.				
						-
Total additions fo	r Land Improvements	\$	3,546		\$ -	٦
Deletions:						1
		-				-
		4				1
						1
Lotal deletions for	· Land Improvements	\$	-		\$ -	7

<sup>\*</sup>Ties to Page 23, Line A3

### Schedule of Building Improvements Acquired during this report period

				Useful		
Acquisition Date	Description of Item	,	Cost	Life	Dej	reciation
Additions:				***		
	RENOVATION- "FLOORING, PAINTING" RCH UNIT #211	\$	4,205	10	\$	210
1/14/2021	RENOVATION-"FLOORING, PAINTING" RCH UNIT #212	\$	4,435	10	\$	222
	RCH COMMON AREA/HALLWAY RENOVATION "FLOORING,	\$	15,220	10	\$	761
1/14/2021	RCH DINING ROOM-WALL DESIGNS, FLOORING	\$	19,911	10	\$	996
3/9/2021	RENOVATION-"FLOORING, PAINTING" RCH UNIT #206	\$	2,305	5	\$	231
3/31/2021	RCH COMMON AREA/HALLWAY RENOVATION	\$	9,796	5	\$	980
3/1/2021	RCH DINING RENOV-REMOVE FLOOR TILES	\$	11,500	15	\$	383
3/8/2021	NEW FLOORING-RCH UNIT #203	\$	2,840	5	\$	284
7/29/2021	HC ROOF REPAIR-ENTRY WAY	\$	25,553	15	\$	852
8/31/2021	RENOVATION-HC BATHROOMS	\$	60,111	15	\$	2,004
8/4/2021	HC DINING RENOV-FLOORING, PAINT	\$	25,653	5	\$	2,565
8/1/2021	NEW FLOORING-HC UNIT #236	\$	1,105	5	\$	110
8/1/2021	NEW FLOORING-HC UNIT # 213	\$	2,727	5	S	273
9/29/2021	HC ROOMS RENOV INSTALL. NEW SHOWEERS, BATHROOM	\$	49,967	15	\$	1,666
	Miscellaneous Reconciling Adjustment to Detail	\$	148		\$	-
Total additions fo	r Building Improvements	\$	235,475		\$	11,535
Deletions:						
Total deletions for	Building Improvements	\$			\$	

<sup>\*</sup>Ties to Page 23, Line B3

### Schedule of Non-Movable Equipment Acquired during this report period

			Useful		
Acquisition Date	Description of Item	Cost	Life	Dep	reciation
Additions:					
10/31/2020	PINES, REPLACE DOOR ALARMS	\$ 5,420	15	\$	181
2/9/2021	HC BASEMENT-SPRINKLER REPLACEMENT	\$ 8,110	15	\$	270
3/31/2021	HC RTV AIR PUIFIERS	\$ 2,475	10	\$	124
4/30/2021	RCH DINING-STEEL TABLES	\$ 9,150	15	\$	305
6/8/2021	HC HEAT PUMP	\$ 7,365	10	\$	368
6/30/2021	FIRE ALARMS, 50% DOWN	\$ 9,500	15	\$	317
7/12/2021	RCH PATIO RENOVATION PROJECT-NEW AWNING	\$ 14,950	15	\$	498
8/10/2021	HC BASEMENT-TRANSFER SWITCH	\$ 3,800	10	\$	190
8/17/2021	HC BATHROOMS-MIRRORS	\$ 2,521	10	\$	126
9/15/2021	HC EAST DUCT SMOKE DET	\$ 3,500	10	\$	175
9/30/2021	HC FIRE ALARM SYSTEM	\$ 27,890	10	\$	1,394
Total additions fo	r Non-Movable Equipment	\$ 94,680		\$	3,949

<sup>\*\*</sup>Ties to Page 23, Line A2

<sup>\*\*</sup>Ties to Page 23, Line B2

Deletions:			[		
Total deletions for Non-Movable Equipment	\$	-		\$	-

<sup>\*</sup>Ties to Page 23, Line C3

### Schedule of Movable Equipment Acquired during this report period

	<b>5</b> 4 4 4 4 4		_	Useful		
Acquisition Date Additions:	Description of Item	·	Cost	Life	De	preciation
	IIC COALE	+			_	
	HC SCALE	\$	1,494	10	\$	75
	RTV UTILITY EQUIPMENT	\$	4,072	10	\$	204
	REHAB, LAPTOPS	\$	3,140	5	\$	314
	NSG, MATTRESS	\$	2,562	10	\$	128
	SCALE WHEELCHAIR	\$	4,532	10	\$	227
	HEALTHCARE SLING	\$	1,007	10	\$	50
	AIR SANITIZERS	\$	3,291	10	\$	165
	NEGATIVE AIR MACHINE	\$	2,394	10	S	120
	NURSING, AIR PURIFIER	\$	1,100	10	\$	55
	ULTRASOUND BLADDER SCANNER	\$	2,246	10	S	112
	NSG BEDS - EQUIP10HC	\$	14,088	10	\$	704
	6 NURSING MONITORS W/STANDS	\$	16,429	10	\$	821
	NURSING, PUMP	\$	1,155	10	\$	58
	RCH DINING-ROOM DESIGN SERVICES, INCL. ARM CHAIRS,	\$	22,428	10	\$	1,121
	HEALTHCARE DOOR	\$	2,955	10	\$	148
	HC SALON-TV, HAIR DRYER, TROLLEY CARTS	\$	1,099	10	\$	55
	UPGRADE LOCKS ON NORTH	\$	2,385	10	\$	119
6/30/2021	WATER HEATER RPRS	\$	6,450	10	\$	323
6/30/2021	SOCIAL SVCS DIRECTOR COMPUTER	\$	1,709	5	\$	171
7/31/2021	LAPTOP - REHAB	\$	9,990	5	\$	999
8/31/2021	HC FURNITURE, DRESSERS, RAILS	\$	101,827	10	\$	5,091
8/31/2021	NURSING, WIRE HAMPER	\$	1,096	10	\$	55
9/30/2021	HC ROOMS - CHAIRS	\$	27,167	10	\$	1,358
9/30/2021	HC BATHROOMS	\$	1,624	10	\$	81
9/30/2021	FINANCE COMPUTERS	\$	6,400	5	\$	640
9/30/2021	CHRISTMAS DECORATIONS-SNOWFLAKES WITH LIGHT POL	\$	1,141	5	s	114
	To adjust page 23 to balance sheet, rounding		-1			******
Total additions fo	r Movable Equipment	S	243,779		S	13,308
Deletions:	***************************************	_				
**-						
Total deletions for	Movable Equipment	\$			s	
					پ	

### Schedule of Leasehold Improvements Acquired during this report period

		Useful	
Description of Item	Cost	Life	Depreciation
	***************************************		
	***************************************		
old Improvement			- s -
The state of the s	Ψ -		
	***************************************		
***************************************			
old Improvement	\$ -		s -
	Description of Item  old Improvement	old Improvement S -	Description of Item Cost Life

<sup>\*\*</sup>Ties to Page 23, Line C2

<sup>\*</sup>Ties to Page 23, Line D2c \*\*Ties to Page 23, Line D2b

<sup>\*</sup>Ties to Page 24, Line C3
\*\*Ties to Page 24, Line C2

	<del> </del>	+		-	-				Attac	chmer	t Page
							J				
	···		Mod	lasid	Dendelse	WCCCO 0 4 F	0011				
			weu	icaiu		<b>#6668 &amp; 15</b>	UUH		·		
	<del></del>				FYE 9/30/	2021					
	<del> </del>	+		-	<del> </del>	-					
	Rollf	orwar	d of N	lotor	Vehicles C	ost & Accu	mulated De			<u> </u>	<u></u>
	1(0)	Ero	m Oo	tohor	4 2020 Th	OSI & ACCU	mulated De	epreciation			
	т	110	III OCI	lopei	1, 2020 In	rough Sept	ember 30, 2	2021		,	-
		+	-	-						ļ	
		+	+	<del> </del>							ļ
		+		<del> </del>					<del> </del>	ļ	ļ
				<del></del>			<del> </del>		<u> </u>	<del> </del>	
								Accumulated		<del> </del>	
Movable Equipment-Motor		nileage						Depreciation to	Method of	<b> </b>	Deprecia
vehicles (specify name,		book	-	te of	Historical	Less Salvage	Cost to be	Beginning of	Computing	Useful	For Th
model, and year of each		lained?		isition	Cost	Value	Depreciated		Depreciation	Life	Year
vehicles)	Yes	No	Month	Year							İ
Eviating Mater Valida - A - OSD -	L		<u> </u>	1							
Existing Motor Vehicles As Of Begin	ining	Of Rep	ort Pe	eriod, (	October 1, 2	020:					
2010 Dodge Wheelchair Van	Van	0.000	00	0040							
Side Step Rail for Wheelchair Van	Yes Yes		06 07	2010	33,290 970		33,290	33,290	S/L	4 yrs	100
Sander For 2008 Ford Pick-Up	Yes	-	10	2011	195	1.0	970	970	S/L	4 yrs	
2011 Buick Regal (In Kind Donation)	Yes		6	2015	18,450		195 18,450	146 18,450	S/L	10 yrs	21.0
Eagle Auto Body Ford E250 Van	Yes		1	2017	2,998		2,998	1,299	S/L S/L	4 yrs	
Wheelchair Van	Yes		6	2017	25,265		25,265	15,791	S/L	5 yrs 4 yrs	3
2018 Honda CR-V Touring	Yes		12	2017	16,387		16,387	6,146	S/L	4 yrs	4
Sullivan Honda-Deposit Vehicle	Yes		12	2017	245		245	92	S/L	4 yrs	
2018 Ford 350 Pickup-Black	Yes	100	11	2018	31,464	16.00	31,464	3,933	S/L	4 yrs	7
2018 Ford 350 Pickup-Black Rounding	Yes	-	11	2018	29,043		29,043	3,630	S/L	4 yrs	7
Total Existing Motor Vehicles As Of Octobe	r 1 20'	) n	200		450.000			(1)			
Total Existing motor vehicles As Of Octobe	1 1, 202	1		<del> </del>	158,306		158,306	83,746			23
		-									
Acquisitions Of Motor Vehicles Duri	na Re	port P	eriod I	Fnded	Sentember	30 2021					
	ng rtc	POIL	CIIOGI	Lilaca	September	30, 2021.					
		<b>X</b> (1)				19					
Motor Vehicles Acquired During Report Per	lod						-	-			
Diamagala Of Mata, William			L	ليبيا							
Disposals Of Motor Vehicles During	Repo	rt Peri	od En	ded Se	eptember 30	, 2021:					
	West Control	\$120.02 K.200	and the second second	internance	SOLO SERVICIO SE	//					
Motor Vehicles Disoposed Of During Report	Posts	0.988.0									
	rerioc	•		<del>  </del>	•		-	•			
				<del>                                     </del>							
Total Cost & Accumulated Depre	ciatio	n									
		-									
For Vehicles For Cost Report Y	ear '									- 1	
For Vehicles For Cost Report You Ended September 30, 2021	ear				158,306		158,306	83,746			23,0

State of Connecticut

# Annual Report of Long-Term Care Facility CSP-24 Rev. 10/2006

# Amortization Schedule\*

Nam	Name of Facility			License No.		Report for Year Ended	r Ended		Page	Jo
Elin	Elim Park Baptist Home, Inc.			9999	sc	9/30/2021			24	37
						Accumulated				
		Date of	of			Amort. to				
		Acquisition	ition			Beginning of	Basis for			
				Length of	Cost to Be	Year's	Computing	Rate	Rate Amortization	
	Item	Month	Year	Amortization	Amortized	Operations	Amortization**	%	for This Year	Totals
A.	Organization Expense					•		_		
	1.									
	2.									
	3.									
A-4.	A-4. Subtotal									
В.	Mortgage Expense									
	1. Key Bank-C.O.I Tax Exempt	12	2012	10 Years	66,556	51,777 A	A	10.0%	6.656	
	2.									
	3.									
B-4.	. Subtotal									6.656
ပ	Leasehold Improvements and Other									26-
	1. Acquired prior to this report period				***			*********		
	2. Disposals (attach schedule)									
	3. Acquired during this report period				100					
	(attach schedule)			Control of the contro						
C-4.	C-4. Subtotal									
D.	Total Amortization									9599
T	* Straight-line method must be used									3,22,5

\* Straight-line method must be used. \*\* Specify which of the following bases were used:

A. Minimum of 5 years or 60 months.
B. Life of mortgage; OR
C. Remaining Life of Lease; OR
D. Actual Life if owned by Related Party.

# Elim Park Baptist Home, Inc. LIC #- 666C - 113RH - 1500HA

	Supporting Deta	il for Cost Report	Page 24, line B1 & E FYE 9/30/2021	32; Page 26, line 12; Page 29, line 39	
Refinanced 1990 Bonds	with 1998 Series - Allocation of	of Interest Expense		Allocation of COI and related Amortiz	ation Expense
Interest Expense Disallov	wance Calculation for the 1990	Series Bonds		1990 Series Bonds	
Bond			14,435,000	Total 1990 Series COI	476,425
Percentage Allocated to No			70%	70%	333,492
Allocated to Nursing Hon	ne		10,104,500	30%	142,933
Total Fair Rental Additions	Allowed		<u>7,142,877</u>	1990 Bonds	
Difference (10,104,500-7,1	142.877)		2,961,623	FYE 1998 Expense	14,565.31
Divided By Amount Allocate Percentage of Bond Intere	ed to Nursing Home		10,104,500	30%	<b>10,190.71</b> <b>4,374.60</b>
Original 1990 Series Bo			29.31%		
Bonds % of Inte	rest Maturity				
1,500,000 8.00 1,500,000 8.10 2,915,000 8.75 8,520,000 9.00 14,435,000	FYE 9/30/95 12/94 FYE 9/30/97 12/96 FYE 9/30/09 12/08 FYE9/30/21 12/20	Repaid Total Alloc (requirement of or	cation to Independent cation to Independent riginal Bonds, \$3,000, Collected to be repaid	t Living ,000	
(3,000,000) Repaymer 11,435,000 Bond Prind \$10,104,500 Allocated to \$ 4,330,500 Allocated to	cipal Remaining at Refinance I o NH	Date			
Allocation of the remain	ning 1990 Series Bonds				
Elim Park Baptist Home Elim Park Place	•	10,104,500 1,330,500	88% 12%		
1998 Series Bonds		11,435,000	100%	4000 0 1 0 1	
1000 Oction Bollag				1998 Series Bonds	
1,890,000 Serial Bor	nds - 1998-2003	Allocation New E	Bonds	Total 1998 Series COI	409,813
1,770,000 Term Bon			*	EPBH - 88%	360,635.80
1,025,000 Serial Bor 5,950,000 Term Bon		11,164,876 -104003 I	88%	EPP - 12%	49,177.61
	stable Rate Bonds 2020	11,060,873	Discount	1998 Bonds	
12,635,000		1,470,124	12%	FYE 2013 COI Expense	3,104.66
(104,003) Discount		12,530,997	lotal Debt	EPBH - 88%	2,732.10
12,530,997 Total Debi				EPP - 12%	372.56
				EPBH - Write-Of NBV of COI	128,408.22
				EPP - Write-Of NBV of COI	5,978.82
Refinancing Of 1998 Ser	ries Bonds With First Niagar	a Bank on Dec. 21	, 2012	Total EPBH-1998 Bonds COI	131,140.32
				Total EPP-1998 Bonds COI	6,351.38
2012A Series Bonds (Ta	x-Exempt)			2012A Series Bonds (Tax-Exempt)	
17,714,000		Allocation New B	onds	Total 2012A Series COI	370,506.48
	Elim Park Baptist Home	3,182,080	18%	EPBH - 18%	66,556.47
	Elim Park Place	14,531,920	82%	EPP - 82%	303,950.02
17,714,000		17,714,000	100%	2012A Series Bonds	
				FYE 2017 COI Expense	37,050.72
				EPBH - 18% (see NOTE below)	6,655.68
<b></b>				EPP - 82% (see NOTE below)	30,395.04
First Niagara Bank Loan	(Taxable)			Key Bank Loan (Taxable)	
2,620,828		Allocation New B	onds	Total Key Bank Loan COI	0.00
				EPBH - 88% (see NOTE below)	0.00
	Elim Park Baptist Home Elim Park Place	2,306,329	88%	EPP - 12% (see NOTE below)	-
2,620,828	Linn Fair Flace	2,620,828	12% 100%	Key Bank Loan	
		-10-010-0	100/4	Key Bank Loan FYE 2019 COI Expense	0.00
				EPBH - 88% (see NOTE below)	
Calculation of Interest Ev	pense-2021 Cost Report.xls 1	120/2022 42:42 584	Dage 1	EPP - 12% (see NOTE below)	-
CALLETON OF MINORGER EX	Porior For Longit Lebolity 1	12012022 12.43 PM	r aye i		

# Elim Park Baptist Home, Inc. LIC #- 666C - 113RH - 1500HA Supporting Detail for Cost Report Page 24, line B1 & B2; Page 26, line 12; Page 29, line 39 FYE 9/30/2021

### Calculation of Interest Expense Allowed

Consolidated Interest Expense on 2012A Series Bonds (Tax-Exempt) Percentage Allocated to Home	416,657.80 18%
Interest Expense on FNB Bond Debt for FYE 2019 Per General Ledger	\$ 74,998.40
Consolidated Interest Expense on First Niagara Bank Loan (Taxable)	3,075.68
Percentage Allocated to Home Interest Expense on FNB Loan Debt for FYE 2019 Per General Ledger	\$ 2,706.60
* Key Bank Taxable loan was paid off in November 2018.	\$ 2,700.00
Grand Total Interest Expense for FYE 2019 Allocated To Home	77,705.00
Percentage Disallowed	29.31%
Amount Disallowed	22,775.34
TOTAL ALLOWABLE	54,929.67
Total Interest Expense Allowed	54,929.67
Interest Expense Reported in General Ledger	63,575.70
Interest Expense Disallowance	(8,646.03)

### Calculation of COI Expense Allowed

2012A Series Bonds (Tax-Exemp First Niagara Bank Loan (Taxable	•
Total COI Expense-FYE 2021	6,655.68

NOTE: The Key Bank Taxable loan was liquidated during November 2018, hence, the unamort-tized balance of COI, totalling \$34,716.64 (\$30,550.82 for EPBH and \$4,165.82 for EPP) was written off to Misc. Expense in G & A at September 30, 2019.

### C. Expenditures Other Than Salaries (cont'd) - Property Questionnaire

Name of Facility	License No.	Report for Year Er	nded		Page of
Elim Park Baptist Home, Inc.	666c	9/30/2021			25   37
11. Property Questionnaire					
Part A					
Is the property either owned by th or leased from a Related Party?*	e Facility	O Yes	•	No	If "Yes," complete Part B.
•	silitar in malated by free				If "No," complete Part C.
*If any owner or operator of this factorial business association to any person of	or organization from v	marriage, ownership, about the suit of the	nity to control or nen it is considered		
a related party transaction.					
Description Description		Total			
Date Land Purchased     Date Structure Completed		Various (1957-1986)	-		
3. If <b>NOT</b> Original Owner, Date	of Purchase	Various (1957-2002) N/A			2.100
4. Date of Initial Licensure	or r drenase	07/01/76			A STATE OF THE STA
5. Total Licensed Bed Capacity		132	1		
6. Square Footage		42,220			
7. Acquisition Cost					
a. Land		37,500	-		
b. Building		633,575		1	<b>I</b>
Part B - Owner and Related Part 1. Financing	rties	1st Mortgage	2nd Mortgage	3rd Mortgage	4th Mortgage
a. Type of Financing (e.g., fi	ved variable)	See attached sched			
b. Date Mortgage Obtained	xed, variable)	See attached sched			
c. Interest Rate for the Cost	Year				
d. Term of Mortgage (numbe	r of years)				
e. Amount of Principal Borro					
f. Principal balance outstand					
Complete if Mortgage was R					
During Current Cost Yea					
g. Type of Financing (e.g., financing) h. Date of Refinancing	xed, variable)				
i. New Interest Rate	· · · · · · · · · · · · · · · · · · ·				
j. Term of Mortgage (numbe	r of years)				
k. Amount of Principal Borro					
<ol> <li>Principal Outstanding on N</li> </ol>					
Part C - Arms-Length Lease					
Name and Address of Lessor		Property Leased	Date of Lease	Term of Lease	Annual Amount of Lease
				_	

Note: Be sure required copies of leases are attached to Page 25 and real estate taxes paid by lessor are included on Page 22, Item 10b.

### Elim Park Baptist Home, Inc. Medicaid Provider #6668 & 1500H FYE 9/30/21

### Part B -- Lines 1(g) through 1(l)

On December 21, 2012, Elim Park Baptist Home refinanced its Connecticut Development Authority (CDA) 1998A and 2003 Series bonds through Connecticut Innovations, Inc. (CII) 2012A Series bonds. The new bonds have a variable interest rate that is fixed at 3.070% through the use of an interest rate swap instrument with First Niagara Bank, N.A., which was subsequently acquired by Key Bank during fiscal 2017. The bonds are due in 10 years with a balloon maturity and will be amortized over a 20-year schedule.

Additionally, the Corporation refinanced it's CDA 1998B Series bonds through First Niagara (which was subsequently acquired by Key Bank) with a variable rate term note that is fixed at 3.580% through the use of an interest rate swap instrument with Key Bank (formerly First Niagara Bank). The note was being amortized over a 7 year schedule.

The new CII 2012A Series bond debt is "tax-exempt" debt, which totals \$17,714,000. It was allocated in the ratio of approx. 82% to Elim Park Place (the Independent Living) service line of Elim Park, and 18% to Elim Park Baptist Home (the Skilled Nursing Facility) service line of Elim Park. The Key Bank loan is "taxable" debt, which totals \$2,620,828. It was allocated in the ratio of 12% to Elim Park Place (the (Independent Living) service line of Elim Park, and 82% to Elim Park Baptist Home (the Skilled Nursing Facility) service line of Elim Park. Please note that the Key Bank loan "taxable" debt was liquidated during December 2018; therefore, all principal loan payements ceased subsequent to that month.

Hence, the information shown below, as required pursuant to Pg 25, Part B, Lines 1(a) through 1(f), reflects only the portion of the total "tax-exempt" and "taxable" debt that has been separately allocated to Elim Park Baptist Home; i.e. the Skilled Nursing facility.

	CII Bond Debt Tax-Exempt	Key Bank Loan Taxable	TOTAL CII & FNB Debt
Line 1(a) Type of Financing (e.g., fixed, variable)	Fixed	Fixed	
Line 1(b) Date of Mortgage	Dec. 21, 2012	Dec. 21, 2012	***
Line 1(c) Interest Rate	3.070%	3.580%	
Line 1(d) Term of Mortgage (number of years)	10 Years	7 Years	~~
Line 1(e) Amount of Principal Borrowed	\$3,182,080	\$2,306,328	\$5,488,408
Line 1(f) Principal Outstanding	\$2,048,115	-0-	\$2,048,115

NOTE: "Principal Outstanding" amounts obtained from Long-Term Debt spreadsheet located at: "Users/FinShare/Audit 2020/ Long-Term Debt Account Analysis FYE 2020" (which were then agreed to "Trial Balance" in CROSSREFERENCE file).

# C. Expenditures Other Than Salaries (cont'd) - Interest

Name of Facility	License No.		Report for Ye	ar Ended		Page of
Elim Park Baptist Home, Inc.	666c		9/30/2021			26   37
						Residential Care
Item			Total	CCNH	RHNS	Home
12. Interest						
A. Building, Land Improvem	ent & Non-Movable	9				
Equipment  1. First Mortgage		\$	00570	41.400		22.1.5.6
Name of Lender		Rate	63576	41,420		22,156
Tham of Bender		Rate				
Address of Lender		<u> </u>			100	
					14.2	
2. Second Mortgage		\$				
Name of Lender		Rate				
Address of Lender						
Address of Lender						
3. Third Mortgage		\$				
Name of Lender		Rate				
Address of Lender						
1 5-4 26		Ф.				
4. Fourth Mortgage Name of Lender		\$ Rate				
TVAINE OF ECHUCI		Nate				
Address of Lender						
B. CHEFA Loan Information						
1. Original Loan Amount		\$				
2. Loan Origination Date						
3. Interest Rate %						
4. Term						
5. CHEFA Interest Expen	se					
12 B7. Total Building Interest Expen		\$	(2.57)	41.400		00.154
12 D7. Town Dunning Interest Expen	DE (A1 - A4 + B3)	2	63,576	41,420 Subtotals f		22,156

(Carry Subtotals forward to next page)

# C. Expenditures Other Than Salaries (cont'd) - Interest and Insurance

Name of Facility	License No.	· · · · · · · · · · · · · · · · · · ·	Report for Y	ear Ended		Page of
Elim Park Baptist Home, Inc.	666c		9/30/2021			27   37
						Residential
Iter	m		Total	CCNH	RHNS	Care Home
	Subtotals Br	ought Forward	63,576	41,420		22,156
12. C. Movable Equipment			<u> </u>			
1. Automotive Equipme	nt	\$				
A. Item	Rate	Amount				
Lender						
Address of Lender			100			
2. Other ( <i>Specify</i> )		\$				
A. Item	Rate	Amount				
Lender						
Addraga of Landau						
Address of Lender						
D. H.						
B. Item	Rate	Amount		1		
Lender						
Lender						20 A 1985
Address of Lender	***************************************					
Address of Leffeet						
12. C. 3. Total Movable Equipr	nent Interest					
Expense (C1 + 2)		\$				
12. D. Other Interest Expense (S	Specify)	\$				
`	1 33 ,	·				
13. Total All Interest Expense (1	2B7 + 12C3 + 12I	D) \$	63,576	41,420		22,156
14. Insurance						
a. Insurance on Property (bu		\$	111,542	77,575		33,967
b. Insurance on Automobile		\$	10,811	7,371		3,440
c. Insurance other than Prop		above)				
1. Umbrella (Blanket Co		\$				
2. Fire and Extended Co	verage	\$				
3. Other ( <i>Specify</i> )		\$				
141 77 417						
14d. Total Insurance Expenditure		\$	122,353	84,946		37,407
15. Total All Expenditures (A-13	thru C-14)	\$	13,685,258	11,149,004		2,536,254

# D. Adjustments to Statement of Expenditures

,	e of Fa	-		Li	cense No.	Report for Ye	ear Ended	Page	of
Elim	Park l	3aptis	t Home, Inc.		666c	9/30/2021		28	37
_	_				Total				
	Page		1		Amount of			Resider	ntial Car
No.			Item Description		Decrease	CCNH	RHNS	Н	ome
Page	<u> 10 - S</u>	Salari	es and Wages					70.00	
1.			Outpatient Service Costs	\$					
2.			Salaries not related to Resident Care	\$					
3.	10	A12g	Occupational Therapy	\$	407,764	407,764			
4.			Other - See attached Schedule	\$	36,935	6,356			30,579
	13 - F	Profes	sional Fees						
5.			Resident Care Physicians **	\$					
6.	13	B10a	Occupational Therapy	\$	48,827	48,827			
7.			Other - See attached Schedule	\$	727	474			253
	***************************************	16 -	Administrative and General		9.70				
8.		1.a.6	Discriminatory Benefits	\$	2,248	1,872			376
9.	15	lc	Bad Debts	\$	201,292	177,580			23,712
10.			Accounting	\$					
10a.			Legal	\$	36,008	23,459			12,549
11.	30	IV3	Telephone	\$	3,596	2,343			1,253
12.	15	1h2	Cellular Telephone	\$	8,612	5,611			3,001
13.	15	lf	Life insurance premiums on the life						
			of Owners, Partners, Operators	\$	A COLOR OF THE PROPERTY OF THE		A 100 A		
14.			Gifts, flowers and coffee shops	\$					
15.			Education expenditures to colleges or						
			universities for tuition and related costs						
			for owners and employees	\$					
16.			Travel for purposes of attending						
l			conferences or seminars outside the						
			continental U.S. Other out-of-state						
	- 1		travel in excess of one representative	\$					
17.			Automobile Expense (e.g. personal use)	\$					
18.	16	1m3	Unallowable Advertising *	\$	58,951	38,407			20,544
19.			Income Tax / Corporate Business Tax	\$					
20.	16	1m10	Fund Raising / Contributions	\$	253,225	164,976			88,249
21.			Unallowable Management Fees	\$					
22.			Barber and Beauty	\$					
23.			Other - See attached Schedule	\$	239,393	165,677			73,716
Page	18 - D	ietary	Expenditures		, -	,- , ,			,,,,
24.	18		Meals to employees, guests and others						
			who are not residents	\$	2,462	1,604			858
Page .	19 - L	aundi	ry Expenditures		,	-,001			330
25.			Laundry services to employees, guests	$\dashv$					
			and others who are not residents	\$					
Page	20 - H		keeping Expenditures	7					
26.	T		Housekeeping services to employees, guests	$\dashv$					
		- (	and others who are not residents	\$					
L		l.	Subtotal (Items 1 - 26)	\$	1,300,039	1,044,950			255,089
			Suctour (tonis 1 - 20)	Ψ	1,500,059	1,077,770			433,009

<sup>\*</sup> All except "Help Wanted".

<sup>(</sup>Carry Subtotal forward to next page)

<sup>\*\*</sup> Physicians who provide services to Title 19 residents are required to bill the Department of Social Services directly for each individual resident.

### Schedule of Other Salaries Adjustment

						Re	esidential
Page Re		Description	(	CCNH	RHNS	Ca	re Home
	A12a,b1,b2	To adjust Wages - RN RCH, rate above Aides		***************************************		\$	3,731
	A12c1	To adjust Wages - LPN RCH, rate above Aides		***************************************		\$	23,454
	A12n	To adjust Wages - Admissions counselors for time spent marketing facility	\$	5,747		\$	3,068
10	A120	Disallow Pastoral Wages	\$	517		\$	277
10	A4, A7b, A12d	Employee Wellness Incentive (disallowed on p. 28 Attachement)	\$	92		\$	49
				<del>//-/</del>		+-	
Total Ot	her Salaries A	djustment	\$	6,356	\$ -	\$	30,579

Schedule of Fees Adjustments

						Res	idential
	Line Ref D		CC	CNH	RHNS	Car	e Home
13	12 P	urchased Services- Christian Ministries	\$	474		\$	253
Total Ot	her Fees Adjust	ments	\$	474	\$ -	\$	253

### Schedule of Other A&G Adjustments

					Re	esidential
Page Re		Description	 CCNH	RHNS	Ca	re Home
1	1a	Employee Benefits Attributable to Occupational Therapists	\$ 31,194			
	1a	Employee Benefits Attributable to RCH RNs above Aides			\$	285
	1a	Employee Benefits Attributable to RCH LPNs above Aides			\$	1,794
	1a	Employee Benefits Attributable to Admissions & Marketing Coordinators	\$ 440		\$	234
	1L2	Gifts to Staff and Residents	\$ 17,259		\$	9,231
	1L3	Gifts to employees, discriminatory in nature	\$ 1,975		\$	1,057
	1L5	Education - Therapy	\$ 163		\$	87
	1m8	AICPA - disallowed p. 28 (Attachment)	\$ 204		\$	109
	1m8	CTCPA - disallowed p. 28 (Attachment)	\$ 91		\$	48
	1m8a	Cheshire and Hamden Chambers of Commerce Dues	\$ 810		\$	434
	1m13	Employee Physicals & Other - pre placement physicals - disallowed p. 28 (Attach	\$ 2,139		\$	1,144
16	1m13	Purchased Services - Admissions - disallowed p. 28 (Attachment)	\$ 6,666		\$	3,565
İ		Bank & Credit Card Fees - payment processing, check orders, stop payments,			T	
	1m13	returned item fees, gift annuity fees, Mary Melby fees disallowed p. 28	\$ 33,857		\$	18,110
	5.i.	Employee Background Check - Therapy - disallowed p. 28 (Attachment)	\$ 51		\$	27
	1m13	Other - Admissions - disallowed p. 28 (Attachment)	\$ 476		\$	254
	1m13	Miscellaneous - Administration (Disallow)	\$ 43,479		\$	23,258
	1m13	Other Nursing - Refund Missing Items	\$ 1,009		\$	540
Various	Pages	Outpatient Therapy Disallowance Related To Property And Overhead Costs	\$ 5,617		\$	2,713
16	1m13	Misc HR	\$ 3,709		\$	1,984
	1m13	Miscellaneous- Finance	\$ 1,041		\$	557
16	1m13	Miscellaneous - IT	\$ 5		\$	2
	1m13	Miscellaneous - HR - disallowed p. 28 (Attachment)	\$ 1,977		\$	1,057
16	1m13	Disallow Celtic Consulting - related to accounts recievable collections	\$ 13,437		\$	7,188
20	5L	Other - Therapy - disallowed p. 29	\$ 78		\$	37
					T	
Total Ot	her A&G Adj	ustments	\$ 165,677	\$ -	\$	73,716

		NT TO PAG					PAGE	1 OF 2
(DOCUMENTATION OF	FOUTPATIEN	T THERAPY D	SALL	LOWANCE C	ALCULA	TION)		
MYERS STAUFFER								104000
CTATIEEED								***************************************
SIAUFFER								
SERTIFIED PUBLIC ACCOUNTANTS								
Outpatient Therapy Allocation - Cost Rep	ort Vaar 2021							
Outpatient Includy Anocation - Cost Rep	ort Tear 2021				***************************************			
Outpatient Allocation Percentage								
P. 10 P. CP. W.								
Fotal Square Footage of Facility Therapy Square Footage	71,095 2,580							
Therapy Space as a % of Total Space	3.63%							
Through space as a 70 or votal space	3.0370							
Total Therapy Treatments	55,245						,	
Outpatient Therapy Treatments	6,048							
Outpatient Treatments as a % of Total Treatments	10.95%				***			
Outpatient Allocation (Therapy Space as a % of Total Space x								
Outpatient Anocation (Therapy Space as a % of Total Space x  Outpatient Treatments as a % of Total Treatments)	0.40%							
, Carrier Control of the Control of		1				700		
Expense Item					~~~			
A&G Repairs and Maintenance Heat	167,171 59,221							
Light and Power	134,435							
Other Repairs and Maintenance	16,519				***************************************			
Total	377,346		-					
Less: Facility Self-Disallowed								
Less: Desk Review Disallowed	0							
Less: Field Examination Disallowed Subtotal	377 246							
Outpatient Allocation	377,346 0.40%							
Outpatient Amount	1,499			RCR Maint	& Prop p22	%	Disallowance	WAR TO ALL THE TOTAL THE T
Less: Facility Outpatient Self-Disallowed				CCNH	409,900	71%	1,499	1,071.2
Field Examination Outpatient Adjustment	1,499		,499	RCH	163,737	29%	1,499	427.9
Indirect Housekeeping Salaries	187,273				573,637			
Total Fringes 1.685,645	187,273							
Total Payroll 7,606,024								
Unallowable Fringe Percentage	22.16%							
Housekeeping Salaries & Fringes	228,776				~~~			
Less: Facility Self-Disallowed								
Less: Desk Review Disallowed  Less: Field Examination Disallowed								
Subtotal Subtotal	228,776						-	
Outpatient Allocation	0.40%							
Outpatient Amount	909							
Less: Facility Outpatient Self-Disallowed							and the same of th	
Field Examination Outpatient Adjustment	909	A						
II								
Housekeeping Supplies Housekeeping Purchased Services	32,194 0		-					
Housekeeping Other	5,488					-		
Total	37,682							
Less: Facility Self-Disallowed								
Less: Desk Review Disallowed								
Less: Field Examination Disallowed	0							
Subtotal Contraction Allocation	37,682						-	
Outpatient Allocation Outpatient Amount	0.40%		II.	laning F	Total - 33	0/	Disalle	
Less: Facility Outpatient Self-Disallowed	150	RCR	tiouse	ekeeping Expense	e Fotal p.22	<b>%</b> 59%	Disallowance	624.36
Field Examination Outpatient Adjustment	150	A 1	,059	RCH	26,207	41%	1,059	434.23
	130	Sur			63,889	1170	1,000	127.42

		ATTACHME						PAGE	2 OF 2
	(DOCUMENTATIO	N OF OUTPATIEN	T THERAPY I	DISALL	OWANCE (	CALCULAT	TION)		
	MYERS AND STAUFFER								
	IVIILIXJAND								
	STALIFFER								
	CERTIFIED PURILC ACCOUNTAINITY						~~		
a other ,	T CENTIFICATION ALCOGNISM								
	Outpatient Therapy Allocation - Co	ot Danayt Voor 2021							
	Outpatient Therapy Anocation - Co	st Report Tear 2021							
anital	Property Insurance	111,542				-			
	Insurance Other than Property	111,742				-			
	Umbrella								
	Fire								
~~~~~~~	Other	28,303							
	Real Estate Taxes					-			
	Total	139,845							
	Less: Facility Self-Disallowed	0				<del></del>			
	Less: Desk Review Disallowed	0							
	Less: Field Examination Disallowed	0							***************************************
	Subtotal	139,845				+			
	Outpatient Allocation	0.40%				-			
	Outpatient Amount	556			RCR Insuran	no Total = 27	%	Disallowance	
	Less: Facility Outpatient Self-Disallowed	330			CCNH	122,353	59%		327.9
	Field Examination Outpatient Adjustment	556		550		_ 2259245434454454544542		556	
~~~	Tield Examination Odipatient Adjustment	330		556	RCH	84,946 207,299	41%	556	227.6
air Re	nf			<u> </u>		207,299			
	Land Fair Rent	1533	Based on 2017						
	Real Property Fair Rent	-2minuty-mynthings-packetor	Based on 2017	-					
***************************************	Total Allowable Expenses of Lessor	123,644	Dasca on 2017						
A11	Total	939,152							
	Less: Facility Self-Disallowed	0				-			
***************************************	Less: Desk Review Disallowed	0							**************
	Less: Field Examination Disallowed	0			-	<del> </del>			
	Subtotal	939,152	***************************************						
	Outpatient Allocation	0.40%							
	Outpatient Amount	3,731		Daal Dros	perty Fair Rer	+ W/D 400 2 -	%	Disallowance	
***************************************	Less: Facility Outpatient Self-Disallowed	3,731		Kearro	CCNH	477,259	68%	3,731	2,543.9
	Field Examination Outpatient Adjustment	3,731		2 721					
	Ticia Examination Odipatient Adjustment	3,731		3,731	RCH	222,721	32%	3,731	1,187.1
						699,980			
mildin	g Depreciation & Interest								
u	Building Depreciation	325,327							
	Building Interest	63,576				1			
	Total	388,903							***************************************
	Less: Facility Self-Disallowed	-15.025							
	Less: Desk Review Disallowed	15,025							
	Less: Field Examination Disallowed	0							
	Subtotal Subtotal	373,878							
	Outpatient Allocation	0.40%	***************************************						
	Outpatient Amount			CD D III					
	Outpatient Amount	1,485		CK Buildir	ng Depreciatio		% 71%	Disallowance	10100
		1 1			CCNH	428,261		1,485	1,049.2
	Less: Facility Outpatient Self-Disallowed	1.405		1,485	RCH	178,010	29%	1,485	436.1
	Field Examination Outpatient Adjustment	1,485				(0/0			
		1,485				606,271			
		1,485				606,271			
		1,485				606,271			
		1,485				606,271			
		1,485				606,271			
		1,485			Total				
		1,485				606,271 isallowance			
		1,485			CCNH				5,61
		8,330							5,61° 2,71°

D. Adjustments to Statement of Expenditures (cont'd)

[XI			D. Aujustinents to Statemen					·
	e of Fa			Lic	cense No.	Report for Y	Year Ended	Page of
Elim	Park l	Baptis	t Home, Inc.		666c	9/30/2021		29   37
	_	<u>.</u> .			Total			
1	Page		ł		Amount of			Residential Care
No.	No.	No.	Item Description		Decrease	CCNH	RHNS	Home
			Subtotals Brought Forward	\$	1,300,039	1,044,950		255,089
	20 - I		nt Care Supplies***					
27.			Prescription Drugs	\$	300,058	300,058		
28.		5d	Ambulance/Limousine	\$	6,756	6,756		
29.	20	5f	X-rays, etc	\$	32,966	32,966		
30.	20	5h	Laboratory	\$	37,438	37,438		
31.			Medical Supplies	\$				
32.	20	5e2	Oxygen (non emergency)	\$	18,815	18,815		
33.			Occupational Therapy	\$				
34.			Other - See Attached Schedule	\$	58,664	58,092		572
Page	22 - N	<i><b>lainte</b></i>	enance and Property					
35.			Excess Movable Equipment Depreciation					
			See Attached Schedule	\$	975	679		296
36.			Depreciation on Unallowable					
			Motor Vehicles	\$				
37.			Unallowable Property and Real					4.5
			Estate Taxes	\$				
38.			Rental of Building Space or Rooms	\$				
39.			Other - See Attached Schedule	\$				
Page	27 - I	nsura	nce					
40.			Mortgage Insurance	\$				
41.			Property Insurance	\$				
Other	· - Mis						100	
42.			Other - Indirect	\$				
43.			Interest Income on Account Rec.	\$	***************************************			
44.			Other - Miscellaneous Administrative	\$				
45.			Management Fees Direct	\$		***************************************		
46.			Management Fees Indirect	\$				
47.			Other - Direct	\$	124,409	81,053		43,356
Not F	or Pro		roviders Only		,,,,,,	5,,055		,5,550
48.		~	Building/Non Movable Eq. Depreciation					
			Unallowable Building Interest -					
		1	See Attached Schedule	\$	10,588	6,984		3,604
49.	Total		unt of Decrease (Items 1 - 48)	\$	1,890,708	1,587,791		302,917
L	~ 0.001		of 2 co. cube (xterrib 1 - 10)	Ψ	1,070,700	1,001,191		302,917

<sup>\*\*\*</sup> Items billed directly to Department of Social Services and/or Health Services in CT, or other states, Medicare, and private-pay residents. Identify separately by category as indicated on Page 20.

### Schedule of Other Ancillary Costs

Page Ref	Line Ref	Description	,	CCNH	RHNS		dential e Home
20	51	Supplies - Short Term - wound vac - disallowed p. 29	\$	1,743			
20	51	Equipment Rental - Short Term - wound vac - disallowed p. 29	s	3,553			
20	51	Equipment Rental - Short Term - Air Mattresses - disallowed p. 29	s	902			
20	51	Supplies (Non-Medical) Short Term Related to Med A	S	10,963			
20	5 <b>I</b>	Purchased Services - Therapy - disallowed p. 29	S	5,040			
20	51	Supplies- Therapy - disallowed p. 29	8	7,221			
20	5b	Supplies (Non-Medical) RCH - Estimated Unallowable RCH Supplies		· · · · · · · · · · · · · · · · · · ·		s	535
20	2i	Cable TV - disallowed p. 28 (Attachment)	\$	28,592		s	_
20	5 <b>l</b>	Other - Therapy - disallowed p. 29	s	78		s	37
Total Othe	r Ancillary	Costs	S	58,092	s -	\$	572

### Schedule of Excess Movable Equipment Depreciation

Page Ref	Line Ref	Description		CCNH	RHNS		idential e Home
22	7d	Depreciation - In Kind Donation Power Scooter for Therapy - Year 10	\$	111		s	49
22	7d	Depreciation - Televisons SNF #8a,b, South Lounge, SNF #1a, #1b, #2,	\$	61		8	26
22	7d	Depreciation - 8 Televisons SNF Year 5 of 15	\$	42		\$	18
22	7d	Depreciation Disallowance Re Four New I-Pad Computers Year 5 of 15	s	21		\$	9
22	7d	Depreciation Disallowance Motorized Wheelchair (Therapy) Year 5 of	8	444		S	194
Total Exce	ss Movable	Equipment Depreciation	\$	679	\$ -	\$	296

### Schedule of Other Property Adjustments

Page Ref	Line Ref	Description		CCNH	RHNS	Residential Care Home
			· · · · · · · · · · · · · · · · · · ·			
						<b>_</b>
Total Othe	r Property	Adjustments		¢	<b>S</b> -	•
	op	1 kajustinionis		Ψ -		13 -

Page Ref	Line Ref Descri	ption	CCNH	RHNS	Residential Care Home
Total Othe	r Adjustments	***************************************	\$ -	\$ -	\$ -

Schedule of Other - Miscellaneous Administrative Adjustments

CCNH	RHNS	Residential Care Home
· ·	6	<u> </u>
	CCNH	CCNH RHNS

Schedule of Other - Direct Adjustments

Page Ref	Line Ref	Description		CCNH	RHNS		sidential ire Home
30	IV8	Mary Melby Donations	s	4,785		\$	2,559
30	IV8	Miscellaneous Income - disallowed p. 29	s	35,055		s	18,751
30	IV8	Telephone Income	8	2,343		\$	1,253
30	IV8	Cable TV Income	s	4,877		\$	2,609
30	IV8	Laundry Linen Revenue (from services provided to Independent Living	\$	16,972		s	9,079
30	IV8	Realized Gain/Loss Mary Melby Fund	S	12,685		S	6,785
24	B1	Key Bank-Costs of Issuance (Tax Exempt Debt)-Amortization Expense	\$	4,336		\$	2,320
Total Othe	r Adjustme	ents	S	81,053	\$ -	S	43,356

Schedule of Unallowable Building Interest

						R	<b>lesidential</b>
Page Ref	Line Ref	Description		CCNH	RHNS	C	are Home
22	7d	Depreciation - Resident Supported Standing Table for Therapy -Year	S	181		\$	79
22	7c	Depreciation - Disallowance Re: "Lighting Retrofit Project"	S	652		\$	285
22	7c	Depreciation - Disallowance Re: "Wander Guard Management System	\$	518		\$	227
26	12	Interest Expense - First Niagara Bank Loan	S	5,633		\$	3,013
Total Unal	lowable Bu	ilding Interest	\$	6,984	\$	- \$	3,604

# Elim Park Baptist Home, Inc. LIC #- 666C - 113RH - 1500HA Report Page 24. line B1 & B2: Page

Interest Expense Disable with 1998 Series - Allocation of Interest Expense   Interest Expense Disable conduction for the 1998 Series Bonds   14,455,070   1501 1903 Series Bonds   14,455,070   1501 1903 Series Bonds   14,455,070   1501 1903 Series Bonds   14,455,070   1501 1903 Series Bonds   14,455,070   1501 1903 Series Bonds   14,455,070   1501 1903 Series Bonds   14,455,070   1501 1903 Series Bonds   14,455,070   1501 1903 Series Bonds   14,455,070   1501 1903 Series Bonds   14,455,070   1501 1903 Series Bonds   14,455,070   1501 1903 Series Bonds   14,455,070   1501 1903 Series Bonds   14,455,070   1501 1903 Series Bonds   14,455,070   1501 1903 Series Bonds   14,455,070   1501 1903 Series Bonds   1501 190		Supporting Deta	il for Cost Report	Page 24, line B1 & B FYE 9/30/2021	2; Page 26, line 12; Page 29, line 39	
Parcentrage Affactaced to Inturing Home	Refinanced 1990 Bonds w	ith 1998 Series - Allocation o	of Interest Expense		Allocation of COI and related Amortiz	zation Expense
Percentage Allocated to Nusring Indone   10,046,590   30%   13,050   142,533   1930 Bonds   19	Interest Expense Disallowa	ince Calculation for the 1990	Series Bonds		1990 Series Bonds	
Professional part of the pa				14,435,000	Total 1990 Series COI	476.425
Total Fair Ranial Additions Allowed   \$\frac{\text{\$1.52,877}}{2.981,623}  \text{\$1900 Bonds}{\text{\$1000,6500,7142,877}}   \text{\$1000,6500,7142,877}{\$1000,6500,7142,877}   \$2.3315}   \$1000,6500,7142,877}{\$10000,6500,7142,877}   \$1000,6500,7142,877}{\$10000,6500,7142,877}   \$1000,6500,7142,877}{\$100000,6500,7142,877}   \$1000,6500,7142,877}{\$1000000000000000000000000000000000000		-			70%	
Manual   M	Allocated to Nursing Home			10,104,500	30%	142,933
Difference (10,104,500-7,125,277)   2,961,623   70%   10,109,71	Total Fair Rental Additions A	llowed		<u>7,142,877</u>	1990 Bonds	
	Difference (10 104 500 7 14	7 0771		0.004.000	· · · · · · · · · · · · · · · · · · ·	
						•
1,500,000   8,00   FYE 970905 1094   Repaid Total Allocation to Independent Living 1,500,000   8,10   FYE 970905 1298   Repaid Total Allocation to Independent Living 2,915,000   8,15   FYE 970905 1298   Repaid Total Allocation to Independent Living 2,915,000   8,75   FYE 970905 1208   Repaid Total Allocation to Independent Living 3,850,000   9,00   FYE 970902 1208   Repaid Total Allocation to Independent Living 1,455,000   9,00   FYE 970902 1208   Repaid Total Allocation to Independent Living 1,455,000   8,000   FYE 970902 1208   Repaid Total Allocation to Independent Living 1,455,000   8,000   FYE 970902 1208   Repaid Total Allocation to Independent Living 3,100,000,000   Repayment of Principal Remaining at Refinance Date 310,104,500   8,000   10				• •	30 %	4,374.60
1.500.000 8.00 FYE 9/30/99 12/96 Repaid Total Allocation to Independent Living 1.500,000 8.10 FYE 9/30/99 12/96 Repaid Total Allocation to Independent Living 2.915.000 8.75 FYE 9/30/99 12/98 (requirement of original Bonds, \$3,000,000 8.75 FYE 9/30/99 12/98 (requirement of original Bonds, \$3,000,000 1.14,455,000 8.75 FYE 9/30/99 12/98 FYE 9/30/99 12/98 FYE 9/30/99 12/98 FYE 9/30/99 12/98 FYE 9/30/99 12/98 FYE 9/30/99 12/98 FYE 9/30/99 12/98 FYE 9/30/99 12/98 FYE 9/30/99 12/98 FYE 9/30/99 12/98 FYE 9/30/99 12/98 FYE 9/30/99 12/98 FYE 9/30/99 12/98 FYE 9/30/99 12/98 FYE 9/30/99 12/98 FYE 9/30/99 12/98 FYE 9/30/99 12/99 12/98 FYE 9/30/99 12/99	Original 1990 Series Bon	ds				
1.500.000 8.00 FYE 9/30/99 12/96 Repaid Total Allocation to Independent Living 1.500,000 8.10 FYE 9/30/99 12/96 Repaid Total Allocation to Independent Living 2.915.000 8.75 FYE 9/30/99 12/98 (requirement of original Bonds, \$3,000,000 8.75 FYE 9/30/99 12/98 (requirement of original Bonds, \$3,000,000 1.14,455,000 8.75 FYE 9/30/99 12/98 FYE 9/30/99 12/98 FYE 9/30/99 12/98 FYE 9/30/99 12/98 FYE 9/30/99 12/98 FYE 9/30/99 12/98 FYE 9/30/99 12/98 FYE 9/30/99 12/98 FYE 9/30/99 12/98 FYE 9/30/99 12/98 FYE 9/30/99 12/98 FYE 9/30/99 12/98 FYE 9/30/99 12/98 FYE 9/30/99 12/98 FYE 9/30/99 12/98 FYE 9/30/99 12/98 FYE 9/30/99 12/99 12/98 FYE 9/30/99 12/99						
1.500,000 8.16 FYE 9/3009 12098 Repaid Total Allocation to Independent Living 8.200,000 9.00 FYE9/3009 1209 in Life Use Fees Collected to be repaid 12/94 - 12/96)  1.14/35,000 Bond Principal 11.435,000 Bond Principal Remaining at Refinance Date 11.435,000 Bond Principal Remaining at Refinance Date 11.435,000 Bond Principal Remaining 1990 Series Bonds	Bonds % of Intere	st Maturity				
1.500,000 8.16 FYE 9/3009 12098 Repaid Total Allocation to Independent Living 8.200,000 9.00 FYE9/3009 1209 in Life Use Fees Collected to be repaid 12/94 - 12/96)  1.14/35,000 Bond Principal 11.435,000 Bond Principal Remaining at Refinance Date 11.435,000 Bond Principal Remaining at Refinance Date 11.435,000 Bond Principal Remaining 1990 Series Bonds	4 500 000					
2.915.000    0.75			Repaid Total Allo	cation to Independent	Living	
8,520,000   9,00   FYE9/30/21 12/20   In Life Use Fees Collected to be repaid 12/94 - 12/96)			(requirement of o	riginal Bonds, \$3,000.	Living 000	
1,000,000   Repayment of Principal   Semaining at Refinance Date   11,1435,000   Bond Principal Remaining at Refinance Date   11,1435,000   Bond Principal Remaining at Refinance Date   14,104,500   88%   14,303,500   Allocated to Ni her remaining 1990 Series Bonds   12,104,500   12%   11,435,000   100%   12%   11,435,000   100%   12%   11,435,000   100%   12%   11,435,000   100%   11,435,000   100%   12%   11,435,000   100%		FYE9/30/21 12/20	in Life Use Fees	Collected to be repaid	12/94 - 12/96)	
11,435,000   Bond Principal Remaining at Refinance Dele	14,435,000					
\$10,104,500 Allocated to Independent Living  Allocation of the remaining 1990 Series Bonds  Elim Park Baptist Home						
Section of the remaining 1990 Series Bonds   Seri			Date			
Elim Park Baptist Home   10,104,500   88%   1,330,500   12%   11,435,000   100%   10						
Park Baptist Home		_				
Elim Park Place   1,330,500   12%   11,435,000   100%		ig 1000 ochica bolius				
11,435,000   100%   11,435,000   100%   11,435,000   100%   11,435,000   100%   11,435,000   100%   11,435,000   100%   11,435,000   100%   11,435,000   100%   11,435,000   100%   11,435,000   100%   11,435,000   100%   11,435,000   100%   11,435,000						
1,890,000	Limit dik i lace					
1,890,000   Serial Bonds - 1998-2003   Allocation New Bonds   Total 1998 Series COI   409,813	1998 Series Bonds		.,,			
1,770,000   Term Bonds - 20097   11,164,876   88%   EPBH - 88%   306,635,80     1,025,000   Serial Bonds - 2018   -104003   Discount     2,000,000   3 yr. Adjustable Rate Bonds 2020   11,660,873   1998 Bonds     12,635,000   Term Bonds - 2018   -104003   Discount     2,000,000   3 yr. Adjustable Rate Bonds 2020   11,660,873   1998 Bonds     12,635,009   Total Debt   12,530,997   Total Debt   EPBH - 88%   2,732,10     12,530,997   Total Debt   EPBH - Write-Of NBV of COI   5,978,82     17,714,000   Allocation New Bonds   EPBH - 1998 Bonds COI   5,978,82     17,714,000   Allocation New Bonds   Total EPP-1998 Bonds (Tax-Exempt)     17,714,000   EIIm Park Baptist Home   3,182,080   18%   EPBH - 18%   66,556,47     EIIm Park Place   14,531,920   82%     17,714,000   100%   EPBH - 18% (see NOTE below)   6,655,68     EPP - 82% (see NOTE below)   EPBH - 88% (see NOTE	1990 Series Bolius				1998 Series Bonds	
1,7714,000 Fem Bonds - 2009 Fem Bonds - 2008			Allocation New I	Bonds	Total 1998 Series COI	409,813
1-10-10-10-10-10-10-10-10-10-10-10-10-10	•		44 404 070			
2,000,000   3 yr. Adjustable Rate Bonds 2020   11,060,873   1,470,124   12%   FYE 2013 COI Expense   3,104,66   104,003) Discount   12,530,997   Total Debt   EPBH - 88%   2,732.10   EPBH - 88%   EPBH - 12%   372.56   EPBH - Write-Of NBV of COI   128,408.22   EPP - Write-Of NBV of COI   5,978.82   Total EPBH - 1998 Bonds COI   131,140.32   Total EPBH - 1998 Bonds COI   131,140.32   Total EPBH - 1998 Bonds COI   370,506.48   EPBH - 18%   66,556.47   EPBH - 18%   68,556.47   EPBH - 18%   68,056.47					EPP - 12%	49,177.61
104,003   Discount   12,530,997   Total Debt   EPBH - 88%   2,732.10     12,530,997   Total Debt   12,530,997   Total Debt   EPBH - 88%   2,732.10     12,530,997   Total Debt   EPBH - 88%   EPP - 12%   372.56     128,408.22   EPBH - Write-Of NBV of COI   5,978.82     12,530,997   Total EPBH - 1998 Bonds COI   5,978.82     131,140.00   Total EPBH - 1998 Bonds COI   6,351.38     2012A Series Bonds (Tax-Exempt)   2012A Series Bonds (Tax-Exempt)   17,714,000   Allocation New Bonds   18%   EPBH - 18%   66,556.47     17,714,000   Elim Park Baptist Home   14,531,920   82%   14,531,920   82%     17,714,000   100%   2012A Series Bonds   FYE 2017 COI Expense   37,050.72     17,714,000   EPBH - 18% (see NOTE below)   6,655.68     17,714,000   EPBH - 88% (see NOTE below)   5,655.68     17,714,000   EPBH - 88% (see NOTE below)   2,620,828   Allocation New Bonds   EPBH - 88% (see NOTE below)   2,620,828   2,620,828   100%   EPBH - 88% (see NOTE below)   2,620,828   100%		able Rate Bonds 2020		D. GOOGLITE	1998 Bonds	
12,530,997   Total Debt   EPP - 12%   372.56						
Refinancing Of 1998 Series Bonds With First Niagara Bank on Dec. 21, 2012   EPBH - Write-Of NBV of COI   5,978.82   5,978.82   17,714,000   Allocation New Bonds   18%   EPBH - 18%   EPBH - 18%   66,556.47   Elim Park Baptist Home   17,714,000   17,71			12,530,997	Total Debt		
Refinancing Of 1998 Series Bonds With First Niagara Bank on Dec. 21, 2012   Total EPBH-1998 Bonds COI   131,140.32   Total EPP-1998 Bonds COI   6,351.38	,,				EPP - 12%	372.56
Total EPBH-1998 Bonds COI   131,140.32   Total EPBH-1998 Bonds COI   6,351.38					EPBH - Write-Of NBV of COI	128,408.22
Total EPP-1998 Bonds COI   6,351.38   2012A Series Bonds (Tax-Exempt)   370,506.48   EPBH - 18%   66,556.47   82%   303,950.02   2012A Series Bonds   EPBH - 18%   66,556.47   303,950.02   2012A Series Bonds   EPBH - 18%   66,556.47   303,950.02   2012A Series Bonds   EPBH - 18% (see NOTE below)   6,655.68   EPP - 82% (see NOTE below)   6,655.68   EPP - 82% (see NOTE below)   30,395.04   2012A Series Bonds   EPBH - 18% (see NOTE below)   6,655.68   EPP - 82% (see NOTE below)   30,395.04   2012A Series Bonds   EPBH - 18% (see NOTE below)   6,655.68   EPP - 82% (see NOTE below)   6,665.68   EPP - 82% (see NOTE below)   6,665.68   EPP - 82% (see NOTE below)   6,66	Refinancing Of 1998 Serie	e Rande With Firet Nisasr	a Bank on Dog 24	2042		
2012A Series Bonds (Tax-Exempt)   2012A Series Bonds (Tax-Exempt)	COMMON OF TOOL OCITE	S Donas With 1 115t Magai	a Dalik Oli Dec. 21	, 2012		
17,714,000	2042A Santas Daniela (Terr	<b>-</b>				0,001.00
Elim Park Baptist Home Elim Park Place	ZUIZA Series Bonds (Tax-	Exempt)			2012A Series Bonds (Tax-Exempt)	
Flim Park Baptist Home   3,182,080   18%   EPP - 82%   303,950.02	17,714,000		Allocation New B	londs	Total 2012A Series COI	370,506.48
Elim Park Place 14,531,920 82%  17,714,000 100% 2012A Series Bonds FYE 2017 COI Expense 37,050.72 EPBH - 18% (see NOTE below) 6,655.68 EPP - 82% (see NOTE below) 30,395.04  First Niagara Bank Loan (Taxable)  2,620,828 Allocation New Bonds Total Key Bank Loan COI EPBH - 88% (see NOTE below) - Elim Park Baptist Home Elim Park Place 314,499 12%  2,620,828 100% Key Bank Loan FYE 2019 COI Expense FYE 2019 COI Expense 0.00 EPBH - 88% (see NOTE below) - FYE 2019 COI Expense 0.00 EPBH - 88% (see NOTE below) - FYE 2019 COI Expense 0.00 EPBH - 88% (see NOTE below) - FYE 2019 COI Expense 0.00 EPBH - 88% (see NOTE below) - FYE 2019 COI Expense 0.00		Flim Park Bantiet Haw-	2 402 000	400/		66,556.47
17,714,000  17,714,000  100%  2012A Series Bonds FYE 2017 COI Expense EPBH - 18% (see NOTE below) EPP - 82% (see NOTE below)  2,620,828  Allocation New Bonds  Elim Park Baptist Home Elim Park Place 2,306,329 Elim Park Place 2,620,828  2,620,828  ENGRE Bonds FYE 2017 COI Expense EPBH - 18% (see NOTE below) 30,395.04  Key Bank Loan (Taxable)  Total Key Bank Loan COI EPBH - 88% (see NOTE below) EPP - 12% (see NOTE below) - EPBH - 88% (see NOTE below) - EPBH - 12% (see NOTE below)					EPP - 82%	303,950.02
EPBH - 18% (see NOTE below)   6,655.68   EPP - 82% (see NOTE below)   30,395.04	17,714,000				2012A Series Bonds	
EPP - 82% (see NOTE below)   30,395.04						37,050.72
Column   C						
2,620,828  Allocation New Bonds  Film Park Baptist Home Elim Park Place  2,306,329 88% EPP - 12% (see NOTE below)  2,620,828 100%  Key Bank Loan  FYE 2019 COI Expense  EPBH - 88% (see NOTE below)  -  EPBH - 88% (see NOTE below)  FPBH - 88% (see NOTE below)  FPBH - 88% (see NOTE below)  -  EPBH - 88% (see NOTE below)  FPPB - 12% (see NOTE below)  FPPB - 12% (see NOTE below)	El-ANI - :				Li i - 02% (See NOTE DEIOW)	JU,J95.U4
Elim Park Baptist Home   2,306,329   88%   EPBH - 88% (see NOTE below)   -	rirst Niagara Bank Loan (	[axable]			Key Bank Loan (Taxable)	
Elim Park Baptist Home Elim Park Place 2,306,329 88% EPB - 88% (see NOTE below) - 2,620,828 100% Key Bank Loan FYE 2019 COI Expense 0.00 EPBH - 88% (see NOTE below) - EPBH - 88% (see NOT	2,620,828		Allocation New B	onds	Total Key Bank Loan COI	0.00
Elim Park Baptist Home Elim Park Place 2,306,329 88% EPP - 12% (see NOTE below) - 2,620,828 100% Key Bank Loan FYE 2019 COI Expense 0.00 EPBH - 88% (see NOTE below) - FPP - 12% (see NOTE below)						- 0.00
2,620,828 2,620,828 100% Key Bank Loan  FYE 2019 COI Expense 0.00  EPBH - 88% (see NOTE below) -  FPP - 12% (see NOTE below)						-
FYE 2019 COI Expense 0.00  EPBH - 88% (see NOTE below) -  EPP - 12% (see NOTE below)	2,620,828	-mir aik Flace			Key Bank Loan	
EPBH - 88% (see NOTE below) -					· ·	0.00
Calculation of Interest Expense-2021 Cost Report.xls 1/29/2022 12:43 PM Page1					EPBH - 88% (see NOTE below)	-
	Calculation of Interest Expe	ense-2021 Cost Report.xls 1	/29/2022 12:43 PM	Page1	EPP - 12% (see NOTE below)	•

### Elim Park Baptist Home, Inc. LIC #- 666C - 113RH - 1500HA Supporting Detail for Cost Report Page 24, line B1 & B2; Page 26, line 12; Page 29, line 39

# FYE 9/30/2021

### Calculation of Interest Expense Allowed

Consolidated Interest Expense on 2012A Series Bonds (Tax-Exempt) Percentage Allocated to Home	416,657.80 18%
Interest Expense on FNB Bond Debt for FYE 2019 Per General Ledger	\$ 74,998.40
Consolidated Interest Expense on First Niagara Bank Loan (Taxable) Percentage Allocated to Home	3,075.68 88%
Interest Expense on FNB Loan Debt for FYE 2019 Per General Ledger * Key Bank Taxable loan was paid off in November 2018.	\$ 2,706.60
Grand Total Interest Expense for FYE 2019 Allocated To Home	77,705.00
Percentage Disallowed	29.31%
Amount Disallowed	22,775.34
TOTAL ALLOWABLE	54,929.67
Total Interest Expense Allowed	54,929.67
Interest Expense Reported in General Ledger	63,575.70
Interest Expense Disallowance	(8,646.03)

### Calculation of COI Expense Allowed

2012A Series Bonds (Tax-Exemp First Niagara Bank Loan (Taxablı	6,655.68 -
Total COI Expense-FYE 2021	6,655.68
NOTE: The Key Bank Taxable loan wa during November 2018, henc tized balance of COI, totalling (\$30,550.82 for EPBH and \$4, EPP) was written off to Misc. G & A at September 30, 2019.	e, the unamort- g \$34,716.64 165.82 for Expense in

### F. Statement of Revenue

Name of Facility	F. Statement of Re	<u> </u>		7 Γ 1 1		In	
Elim Park Baptist Home, Inc.	License No. 666c		Report for Y 9/30/2021	ear Ended		Page 30	of   37
	Item		Total	CCNH	RHNS	Reside	ntial Care
I. Resident Room, Board & Routine C	Care Revenue						
1. a. Medicaid Residents (CT only)		\$	9,526,248	6,108,413			3,417,835
b. Medicaid Room and Board Co	ntractual Allowance **	\$	(3,897,071)	(3,380,248)			(516,823)
2. a. Medicaid (All other states)		\$					
b. Other States Room and Board	Contractual Allowance **	\$					
3. a. Medicare Residents (all inclus	ive)	\$	2,792,418	2,792,418			
b. Medicare Room and Board Co	ntractual Allowance **	\$	415,937	415,937			
4. a. Private-Pay Residents and Oth	er	\$	3,879,100	3,802,413			76,687
b. Private-Pay Room and Board (	Contractual Allowance **	\$	(265,527)	(265.003)			(524)
II. Other Resident Revenue							
a. Prescription Drugs - Medicare		\$	162,280	162,280		22(10)4)4424111000	and the second s
b. Prescription Drugs - Medicare	Contractual Allowance **	\$	(162,280)	(162.280)			
c. Prescription Drugs - Non-Med	icare	\$	19,751	19,751			
d. Prescription Drugs - Non-Med	icare Contractual Allowance **	\$	(19,713)	(19.713)			
2. a. Medical Supplies - Medicare		\$					
b. Medical Supplies - Medicare C		\$					
c. Medical Supplies - Non-Medic		\$					
d. Medical Supplies - Non-Medic	care Contractual Allowance **	\$					
3. <u>a. Physical Therapy - Medicare</u>		\$	587,704	587,704			
b. Physical Therapy - Medicare C		\$	(447,229)	(447.229)			
c. Physical Therapy - Non-Medic		\$	178,389	178,389			
d. Physical Therapy - Non-Medic	are Contractual Allowance **	\$	(99.376)	(99.376)			
4. a. Speech Therapy - Medicare		\$	89,159	89,159			
b. Speech Therapy - Medicare Co		\$	(73.185)	(73,185)			
c. Speech Therapy - Non-Medica		\$	22,411	22,411			
d. Speech Therapy - Non-Medica		\$	(20,740)	(20.740)			
5. a. Occupational Therapy - Medic		\$	539,915	539,915			
b. Occupational Therapy - Medic		\$	(469,526)	(469.526)			
c. Occupational Therapy - Non-N		\$	101,034	101,034			
	Medicare Contractual Allowance **	\$	(102,575)	(102.575)			
6. a. Other (Specify) - Medicare		\$					
b. Other (Specify) - Non-Medicar		\$	235	235			
III. Total Resident Revenue (Section I.	thru Section II.)	\$	12,757,359	9,780,184		2	,977,175
IV. Other Revenue*							
1. Meals sold to guests, employees &	others	- \$					
2. Rental of rooms to non-residents		\$					
3. Telephone		\$	3,596	2,343			1,253
4. Rental of Television and Cable Se	rvices	\$	7,486	4,877			2,609
5. Interest Income (Specify)		\$	18,367	11,966			6,401
6. Private Duty Nurses' Fees		\$					
7. Barber, Coffee, Beauty and Gift sh	ops	\$					
8. Other (Specify)		\$	4,260,632	2,775,808		1	,484,824
V. Total Other Revenue (1 thru 8)		\$	4,290,081	2,794,994		1	,495,087
VI. Total All Revenue (III +V)		\$	17,047,440	12,575,178		4	,472,262

<sup>\*</sup> Facility should off-set the appropriate expense on Page 28 or Page 29 of the Cost Report.

<sup>\*\*</sup> Facility should report all contractual allowances and/or payer discounts.

### Schedule of Other Resident Revenue - Medicare

### Related Exp

Page Ref	Description	cc	CNH	R	HNS		lential Home
30 6a	Other Resident Revenue - Medicare (incl. Oxygen, IV Therapy, Lab, Radiology)	\$	-	\$	_	\$	-
<u></u>		_				<u> </u>	
						-	
Total Othe	er Resident Revenue - Medicare	\$	-	\$	-	\$	

Schedule of Other Non-Medicare Resident Revenue

Related Exp

Page Ref	Description	c	CNH	R	HNS		dential Home
30 6b	Other Non-Medicare Resident Revenue (incl. Lab, Radiology)	\$	235	\$	-	\$	
					·	<del> </del>	
						1	
Total Oth	 er Resident Revenue	\$	235	\$	<del></del>	\$	+

### **Interest Income**

### Account

Page Ref	f Account	Balance	CCNH		RHNS		idential e Home
30 IV5	Interest Income General Fund	(108,301)	\$ 7,944	s	-	\$	4,249
30 IV5	Interest Income Mary Melby Fund	425,638	\$ 4,022			\$	2,152
			······································			<del> </del>	· · · · · · · · · · · · · · · · · · ·
Total Int	terest Income		\$ 11,966	\$	-	\$	6,401

Schedule of Other Revenue

				l	Residential
Page Ref	Description	 CCNH	RHNS	5 (	Care Home
30 IV8	Miscellaneous Income - disallowed p. 29	\$ 35,055		\$	18,751
30 IV8	Miscellaneous Income - Government Funding, (PPP Loan, HHS Funds, Etc.)	\$ 2,549,312		\$	1,363,669
30 IV8	Mary Melby Donations - disallowed p. 29	\$ 4,785		\$	2,559
30 IV8	Gift Annuity Donations (Adjustments)	\$ (6,518)		\$	(3,486)
30 IV8	EPBH Parking Fees	\$ 1,458		\$	780
30 IV8	Realized Gain/Loss Mary Melby Fund	\$ 12,685		\$	6,785
30 IV8	Realized Gain/Loss Gift Annuity	\$ 15,542		\$	8,313
30 IV8	Unrealized Gain/Loss Mary Melby Fund	\$ 26,138		\$	13,982
30 IV8	Unrealized Loss/Gain Gift Annuity	\$ 95,928		\$	51,313
30 IV8	Unrealized Gain/Loss-SWAP Value	\$ 17,026		\$	9,107
30 IV8	Rental Income	\$ 7,425		\$	3,972
30 IV8	Laundry Linen Revenue (from services provided to Independent Living).	\$ 16,972		\$	9,079
Total Othe	r Revenue	\$ 2,775,808	\$	- \$	1,484,824

### G. Balance Sheet

Name of Facility	License No.	Report for Year Ended	Page	e of
Elim Park Baptist Home, Inc.	666c	9/30/2021	31	37
	Account			Amount
Assets				
A. Current Assets				
1. Cash (on hand and in ban	ks)		\$	530,665
<ol><li>Resident Accounts Receive</li></ol>	able (Less Allowance	for Bad Debts)	\$	922,914
<ol><li>Other Accounts Receivable</li></ol>	e (Excluding Owners	or Related Parties)	\$	1,217,206
4 Inventories			\$	
<ol><li>Prepaid Expenses</li></ol>			\$	147,568
a				
b				
c				E. 1
d. See Schedule		147,568		
6. Interest Receivable			\$	
7. Medicare Final Settlement			\$	
8. Other Current Assets (item	iize )		\$	
	***************************************			
See Schedule				
A-9. Total Current Assets (Lines A	\1 thru 8)		\$	2,818,353
B. Fixed Assets				
1. Land			\$	123,173
2. Land Improvements	*Historical Cost	677,315	\$	104,431
	Accum. Deprecia	tion 572,884 Net		
3. Buildings	*Historical Cost	14,158,795	\$	2,365,607
	Accum. Deprecia	tion 11,793,188 Net		
4. Leasehold Improvements	*Historical Cost		\$	
	Accum. Deprecia	tion Net		
5. Non-Movable Equipment	*Historical Cost	1,560,272	\$	572,027
	Accum. Deprecia	tion 988,245 Net		
6. Movable Equipment	*Historical Cost	4,743,817	\$	907,045
	Accum. Depreciat	tion 3,836,772 Net		
7. Motor Vehicles	*Historical Cost	158,306	\$	25,278
	Accum. Depreciat	tion 133,028 Net		•
8. Minor Equipment-Not Dep	reciable		\$	
9. Other Fixed Assets (itemize	?)		\$	139,798
See Schedule		139,798		
B-10. Total Fixed Assets (Lines	B1 thru 9)		\$	4,237,359

<sup>\*</sup> Historical Costs must agree with Historical Cost reported in Schedules on Depreciation and Amortization (Pages 23 and 24).

### Schedule of Prepaid Expenses Page 31 Line A5

Page Ref	Line Ref	Description

31	A5	Prepaid Insurance	\$	60,745
31	A5	Prepaid Dues	\$	5,819
31	A5	Prepaid Services	S	77,534
31	A5	Prepaid Water/Sewer	\$	3,470
Total Pre	 paid Exper	ses	\$	147,568

### Schedule of Other Current Assets (itemized) Page 31 Line A8

Page Ref Line F	Ref Description	ı
-----------------	-----------------	---

		s -
Total Other Current	Assets (Itemize)	<u> </u>

### Schedule of Other Fixed Assets (Itemize) Page 31 Line B9

### Page Ref Line Ref Description

31	В9	Construction In Process	\$ 139,798
Total Othe	r Other Fix	ted Assets (Itemize)	\$ 139,798

### Schedule of Other Assets Page 32 Line D7

### Page Ref Line Ref Description

32	D7		\$	173,643
32	D7	Deposit	S	16,000
Total Othe			\$	189,643

### Schedule of Notes Payable (Itemize) Page 33 Line A2

### Page Ref Line Ref Description

	s	-
Total Notes Payable	\$	-

### Schedule of Other Current Liabilities (Itemize) Page 33 Line A12

### Page Ref Line Ref Description

33	12	Payroll Withholding Liability - Life Insurance	1.0000,2030	\$	16,776
33	12	Payroll Withholding Liability - 401K Plan	1.0000.2035	\$	34,649
33	12	Payroll Withholding Liability - Garnishment	1.0000.2040	\$	9,383
33	12	Payroll Withholding Liability - Pension Loan	1.0000.2045	\$	(18,388)
33	12	Payroll Withholding Liability - Other	1.0000.2050	\$	12,166
33	12	Payroll Withholding Liability - Employee Contributions	1,0000.2051	S	4,644
33	12	Pharmacy Clearing Account	1.0000.2056	s	28,283
33	12	Accrued Accounting Fees	1.0000.2060	\$	46,202
33	12	A/R Refunds	1,0000,2070	\$	(27,407)
33	12	Resident Fund Liability	1.0000,2090	\$	83,716
33	12	Other Current Liabilities	1.0000.2180	\$	82,859
33	12	Accrued Bond Interest	1.0000.2200	\$	2,647
33	12	Due To Third Party Reimbursement Agencies	1.0000,2500	\$	540,917
33	12	Third Party Reserve - Medicare	1.0000.2910	\$	120,726
33	12	Intercompany Payable - Elim Park Place	1,0000.2990	\$	9,386,399
33	12	Unreconciled Balance Sheet Difference-Deemed Immaterial		\$	(200)
Total Othe	Total Other Current Liabilities (Itemize)				0,323,372

### Schedule of Other Long-Term Liabilities (Itemize) Page 34 Line B4

Page Ref Line Ref Description

34	B4	Annuities Payable	\$ 44,139
34	B4	Other Non-Current Liabilities -COVID 19-related Assistance Funding from Connecticut D.S.S.	\$ 59,000
34	B4	Other Non-Current Liabilities -COVID 19-related Assistance Funding from Federal CARES Act (PPP	\$ 350,000
34	B4	Other Non-Current Liabilities -COVID 19-related Assistance Funding from Federal H.H.S.	\$ 270,828
34	B4	Other Non-Current Liabilities -IBNR Reserve re Self-Insurance	\$ 392,188
Total Othe	r Curren	Liabilities (Itemize)	\$ 1,116,155

# G. Balance Sheet (cont'd)

Name of Facility		License No.	Report for Year	Ended	Page	of
Elim Park Baptist Home, I	nc.	666c	9/30/2021		32	37
		Account			An	nount
			Total Broug	ht Forward: \$	)	7,055,712
C. Leasehold or like pro	perty record	ded for Equity Purpos	es.			
1. Land				\$	S	
2. Land Improveme	nts	*Historical Cost				
		Accum. Depreciation	on	Net \$	}	
3. Buildings		*Historical Cost				
	·	Accum. Depreciation	on	Net \$	) }	
4. Non-Movable Eq	uipment	*Historical Cost				
	*****	Accum. Depreciation	on	Net \$		
5. Movable Equipm	ent	*Historical Cost				
		Accum. Depreciation	on	Net \$	•	
6. Motor Vehicles		*Historical Cost		_   "		
***************************************		Accum. Depreciation	on	Net \$		
7. Minor Equipment				\$		
C-8 Total Leasehold or I		ties (C1 thru 7)		\$		
D. Investment and Other						
Deferred Deposit	S			\$		
2. Escrow Deposits				\$		
3. Organization Exp	ense	*Historical Cost	66,556	_		
		Accum. Depreciation	on 58,434			8,122
4. Goodwill (Purcha				\$		
5. Investments Rela	ted to Resid	ent Care (itemize)		\$	ethiologistimologista-inistikologistikon den kelencississi	
6. Loans to Owners	·	<del></del>		\$		
Name and	Address	Amount	Loan D	ate		
7 01 4 (1)						
7. Other Assets ( <i>iten</i>	nize)			\$		189,643
Coo Colondado			100 (42			
See Schedule D-8. <i>Total Investments an</i>	d Other As	sate (Lines D1 th 7)	189,643			107.765
D-9. Total All Assets (Lin			)	\$	·	197,765
D-7. Ioui Au Asseis (Lill	vs Ay T DI	J 1 CO 1 DO)		\$		7,253,477

<sup>\*</sup> Historical Costs must agree with Historical Cost reported in Schedules on Depreciation and Amortization (Pages 23 and 24).

# G. Balance Sheet (cont'd)

Name of Facility		License No.	Report for Year	· Ended	Page	of	
Elim Park B	aptist	Home, Inc.	666c	9/30/2021		33	37
			Account				Amount
Liabilities							
A.		rrent Liabilities					
	<u>l.</u>	Trade Accounts Payable				\$	935,796
	2.	Notes Payable (itemize)				\$	
		Market Control of the					
		See Schedule					
	3.		ant (Comment or arti-	> (''4'		Φ.	
	<u>J.</u>	Loans Payable for Equipm Name of Lender				\$	
		Name of Lender	Purpose	Amount	Date Due		
	4.	Accrued Payroll (Exclusive	e of Owners and/or	Stockholders only)		\$	635,461
	5.	5. Accrued Payroll (Owners and/or Stockholders only)					
	6.	Accrued Payroll Taxes Pay	/able			\$	140,340
	7.	Medicare Final Settlement	Payable			\$	
	8.	Medicare Current Financir	ng Payable			\$	
	9.	Mortgage Payable (Curren				\$	152,391
	10.	Interest Payable (Exclusive	of Owner and/or R	elated Parties)		\$	
****		Accrued Income Taxes*				\$	
	12.	Other Current Liabilities (i	temize)			\$	10,323,372
				****			191 191
	æ			See Schedule	10,323,372		
A-13.	101	tal Current Liabilities (Line	es A1 thru 12)			\$	12,187,360

<sup>\*</sup> Business Income Tax (not that withheld from employees). Attach copy of owner's Federal Income Tax Return.

# G. Balance Sheet (cont'd)

Name of Facility	License No.	Report for Year	Ended	Page	of
Elim Park Baptist Home, Inc.	666c	9/30/2021		34	37
A	Account			An	nount
		Total Brough	nt Forward:		12,187,360
Liabilities (cont'd)				***************************************	
B. Long-Term Liabilities					
Loans Payable-Equipment	T		\$		
Name of Lender	Purpose	Amount	Date Due		to che
İ					
		'			
		!			
Ì		!			
		!			
Mortgages Payable			\$		1,926,830
Loans from Owners or Relationships	ated Parties (itemize)		\$		1,720,030
Name and Address of Lender	Amount	Loan Da			
	Tillouit	Douil De	110		
	1				
		1			
				15 (15) 1 (15)	
4. Other Long-Term Liabilitie.	- (:taia)				
4. Other Long-Term Liaumne	s (Hemize)		\$		1,116,155
See Schedule	***************************************	1 116 155			
B-5. <i>Total Long-Term Liabilities</i> (L	ines R1 thru 4)	1,116,155	\$		2.042.005
C. Total All Liabilities (Lines A-1			\$		3,042,985 15,230,345
· · · · · · · · · · · · · · · · · · ·			Ψ		13,430,343

# G. Balance Sheet (cont'd) Reserves and Net Worth

1	ne of Facility	License No.	Re	eport for Y	Year Ended	 Page		of
Eliı	n Park Baptist Home, Inc.	666c	9/	30/2021		35		37
		Account				A	mount	
A.	Reserves							
	1. Reserve for value of leased	l land				\$ 	****	
	2. Reserve for depreciation va	alue of leased build	ings a	nd appurte	enances			
	to be amortized					\$		
	3. Reserve for depreciation va	alue of leased perso	nal pr	operty (Eq	quity)	\$ 		······································
	4. Reserve for leasehold real	properties on which	n fair r	ental valu	e is based	\$ ***	W	
	5. Reserve for funds set aside	as donor restricted				\$ 		
	6. Total Reserves	77-747-747-147-147-147-147-147-147-147-1				\$ 		
B.	Net Worth							
	1. Owner's Capital					\$ *******		
	2. Capital Stock					\$ 		
·	3. Paid-in Surplus					\$ · · · · · · · · · · · · · · · · · · ·		
	4. Treasury Stock					\$ W. 100 11 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1		
	5. Cumulated Earnings				······································	\$	(11,33	9,050)
	6. Gain or Loss for Period	10/1/20	20	thru	9/30/2021	\$	3,36	2,182
	7. Total Net Worth					\$ 	(7,97	6,868)
C.	Total Reserves and Net Worth	***************************************				\$	(7,97	6,868)
D.	Total Liabilities, Reserves, and	l Net Worth			***************************************	\$	7,25	3,477

### **Annual Report of Long-Term Care Facility**

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# H. Changes in Total Net Worth

Name of Facility	License No.	Report for Year	Ended		Page	of	
Elim Park Baptist Home, Inc.	666c	9/30/2021			36	37	
Account					Amount		
A. Balance at End of Prior Period as shown on Report of 09/30/2020						(11,339,050	
B. Total Revenue (From Statement of Revenue Page 30)						17,047,440	
C. Total Expenditures (From Statement of Expenditures Page 27)						13,685,258	
D. Net Income or Deficit						3,362,182	
E. Balance						(7,976,868)	
F. Additions							
Additional Capital Contribut  2. Other (itemize)	red (itemize)						
F-3. Total Additions							
G. Deductions							
1. Drawings of Owners/Operators/Partners (Specify)				\$			
Name and Address (No., Ci	ty, State, Zip)	Title	Amount				
2. Other Withdrawings (Specify)							
Purpose		Amount					
				\$			
TY DI CDIC							
H. Balance at End of Period 09/30/21				\$	***************************************	(7,976,868)	

# I. Preparer's/Reviewer's Certification

Name of Facility	License No.	Report for Year Ended Page		of						
Elim Park Baptist Home, Inc.	666c	9/30/2021	37	37						
Check appropriate category										
☐ Chronic and Convalescent Nursing Home only (CCNH)	Rest Home with Nursing Supervision only (RHNS)	☑ Residential Care Home								
Preparer/Reviewer Certification										
I have prepared and reviewed this report and am familiar with the applicable regulations governing its preparation. I have read the most recent Federal and State issued field audit reports for the Facility and have inquired of appropriate personnel as to the possible inclusion in this report of expenses which are not reimbursable under the applicable regulations. All non-reimbursable expenses of which I am aware (except those expenses known to be automatically removed in the State rate computation system) as a result of reading reports, inquiry or other services performed by me are properly reported as such in this report on Pages 28 and 29 (adjustments to statement of expenditures). Further, the data contained in this report is in agreement with the books and records, as provided to me, by the Facility.										
Signature of Preparer	Title	Date Signed								
M > >	senior staff Accountar	7 2/15/22								
Printed Name of Preparer										
James J Papierz										
Addres Address	Phone Number	Phone Number								
140 Cook Hill Road, Cheshire CT 06410	203-272-3547 ext 361	203-272-3547 ext 361								
Contacted Person Regarding Additional Information	Phone Number									
James J Papierz	203-272-3547 ext 361									
Contact Email Address										
jpapierz@elimpark.org										